08/19/2008 13:17

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) 2350 KERNER BLVD., SUITE 250 ADDRESS (number and street) Check if different than previously SAN RAFAEL CA 94901 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00384362 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2008 07 3 1 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JASON D. KAUNE Type or Print Name of Treasurer Electronically Filed by JASON D. KAUNE 08 18 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) [®] D D 0.7 0 1 2008 0.7 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 302728.78 January 1 (b) Cash on Hand at 308718.81 Begining of Reporting Period 52850.16 334956.69 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 361568.97 637685.47 6(a) and 6(c) for Column B) 52363.04 328479.54 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 309205.93 309205.93 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 2556.13 Schedule C and/or Schedule D) 07 2006 CA This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

0 1 м м 0 7 м м 0 7 3^D1 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 260607.35 51788.58 (i) Itemized (use Schedule A) 945.54 73592.26 (ii) Unitemized (iii) TOTAL (add 52734.12 334199.61 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 52734.12 334199.61 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 116.04 757.08 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 52850.16 334956.69 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 52850.16 334956.69 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	2463.04	9529.54
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	2463.04	9529.54
2.	Transfers to Affiliated/Other Party		
	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political CommitteesIndependent Expenditure	20500.00	213000.00
	(use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
В.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	29400.00	105950.00
Λ	Fodoral Floation Activity (2 LLS C 421(20))		
u.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)	2.22	2.22
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	52363.04	328479.54
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	52734.12	334199.61
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	52734.12	334199.61
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2463.04	9529.54
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	2463.04	9529.54

FE6AN026

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 303 (check only one) X
4	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۵.	Full Name (Last, First, Middle Initial) MS LESLIE ACHTER Mailing Address 821 ALBEMARLE STF	DEET		Date of Receipt
	Walling Address 021 ALBENIANLE STR	07 05 2008		
	City	State	Zip Code	Transaction ID: INC.A.50615
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR ANALYTICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		375.00	
- 3.	Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK	Date of Receipt		
	Mailing Address 1021 SUNSET RIDGE	07 05 7 2008		
	City	State	Zip Code	Transaction ID: INC.A.50544
	BRIDGEWATER 550 ID	NJ	08807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		RM CONTRACT & CONSUL	TING
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	7
	Other (specify) ▼		750.00	
- :.	Full Name (Last, First, Middle Initial) DIANE ADAMS	•		Date of Receipt
	Mailing Address 34 THOMAS ST.	07 05 7 2008		
	City	State	Zip Code	Transaction ID: INC.A.50917
	CALDWELL	NJ	07006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS REQUIREMENT	S
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		375.00	
		ı		100.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/303 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER Mailing Address 139 BELLVALE LAKE City WARWICK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NY C Occupation VP INFO T	Zip Code 10990 TECHNOLOGY rear-to-Date ▼	Date of Receipt M M O 7 O 5 2 0 0 8 Transaction ID: INC.A.50614 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR JEFFREY ALEXANDER Mailing Address 4 DEERPOND CT City FLEMINGTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 08822 COM STRAT & DELI fear-to-Date ▼ 225.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL D City MIDLOTHIAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State VA C Occupation VP CLINIC	Zip Code 23113 CAL SVCS fear-to-Date ▼ 750.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		<u></u>	115.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MARENE ALLISON Mailing Address 4405 WISMER ROAL City DOYLESTOWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code PA 18901 C Occupation VP SECURITY & ASSET PROTECTION Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO Mailing Address 19 ROSS ROAD City SCARSDALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 10583 C Occupation VP INFO TECHNOLOGY Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) TEJWANSH ANAND Mailing Address 10 WHIPPOORWILL City CHAPPAQUA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	LAKE ROAD State Zip Code NY 10514 C Occupation VP INFO TECHNOLOGY Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	chedule(s) ry of the	FOR LINE NUMBER: PAGE 9 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P			for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR ROGER ANDERSON Mailing Address 833 OXFORD COURT			Date of Receipt
City	State Zip Code		0 7 0 5 2 0 0 8 Transaction ID: INC.A.50907
LEWISVILLE FEC ID number of contributing federal political committee.	TX 75056		Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP & CHIEF PHARMAC Aggregate Year-to-Date ▼	2884.50	
Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS Mailing Address 48 WITTE ROAD City	State Zip Code		Date of Receipt M
HEWITT FEC ID number of contributing federal political committee.	NJ 07421		Transaction ID: INC.A.50746 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXEC CORR		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	375.00	
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt
Mailing Address 20 CHADWELL PLACE			07 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MORRISTOWN	State Zip Code NJ 07960		Transaction ID: INC.A.50692 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	375.00	
SUBTOTAL of Receipts This Page (optional))	242.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 303 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DENNIS AUCH Mailing Address 5788 S. WALDEN GI City MURRAY FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP	State UT C Occupation VP OPS		Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK Mailing Address 2636 SHAKER RD			Date of Receipt O 7 O 5 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.50942
CLEVELAND HEIGHTS FEC ID number of contributing federal political committee.	C	44118	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) ERIK BAGIN	I		Date of Receipt
Mailing Address 73 HIGHLAND AVEN	NUE		07 05 YYYYY 2008
City GLEN RIDGE	State NJ	Zip Code	Transaction ID: INC.A.50916
FEC ID number of contributing federal political committee.	C	07028	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	N VP FINANCE	
Receipt For: Primary General Other (specify) ▼	_,	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	solicit contributions from such committee.		
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO MS!!pg Address	TDEET	Date of Receipt		
Mailing Address 80 N. WOODLAND S		07 05 2008		
City ENGLEWOOD	State Zip Code NJ 07631	Transaction ID: INC.A.50824 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	35.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00			
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA		Date of Receipt		
Mailing Address 69 SKYLINE DR	Mailing Address 69 SKYLINE DR			
City	State Zip Code	Transaction ID: INC.A.50758		
UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00			
Full Name (Last, First, Middle Initial) MR MICHAEL BARONE		Date of Receipt		
Mailing Address 452 MEDWAY RD		07 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: INC.A.50943		
HIGHLAND HEIGHTS FEC ID number of contributing federal political committee.	OH 44143	Amount of Each Receipt this Period 250.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00			
SUBTOTAL of Receipts This Page (optional) .		335.00		
TOTAL This Period (last page this line number	r only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St. or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P.	atements may not be sold or used by any person name and address of any political committee to soll of the committee (a.k.a.	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN BARROW Mailing Address 7 SOUTHVIEW ROAD City RANDOLPH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NJ 07869 C Occupation DIR FINANCE Aggregate Year-to-Date 335.00	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50825 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR DAVID BAUGH Mailing Address 1813 ADONIS AVE City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NV 89074 C Occupation MGR BENEFIT DELIVERY SYSTEMS Aggregate Year-to-Date ▼	Date of Receipt O 7 O 5 2 0 0 8 Transaction ID: INC.A.50872 Amount of Each Receipt this Period 50.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) MR PETER BEGANS Mailing Address 1605 CHARNITA CT City VIENNA FEC ID number of contributing federal political committee.	State Zip Code VA 22182	Date of Receipt O 7 O 5 Transaction ID: INC.A.50721 Amount of Each Receipt this Period 100.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Occupation VP GOVERNMENT AFFAIRS Aggregate Year-to-Date 1500.00	175.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 303 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN BELL Mailing Address 24 GLENWOOD RO City UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	State NJ	Zip Code 07458	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP FINAl Aggregate		
Full Name (Last, First, Middle Initial) JEAN BERGWALL Mailing Address 2546 HOLLYHOCK City GERMANTOWN FEC ID number of contributing	COVE State TN	Zip Code 38138	Date of Receipt M M O 7 O 5 2 0 0 8 Transaction ID: INC.A.50980 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify)	Occupation DIR PRC	n DDUCT LINE II 9 Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS STACEY BERNSTEIN Mailing Address 166 BERKELEY PL			
City GLEN ROCK FEC ID number of contributing federal political committee.	State NJ	Zip Code 07452	Transaction ID: INC.A.50926 Amount of Each Receipt this Period 20.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation ASST CO Aggregate		
SUBTOTAL of Receipts This Page (optional	l)		95.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any pere name and address of any political committee POLITICAL ACTION COMMITTEE (a.k.)	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DAVID BERRY Mailing Address 11 COBBLESTONE L City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NJ 07446 C Occupation DIR TECHNOLOGY Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MS EILEEN BIDELL Mailing Address 71 WASHINGTON C City TOWACO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07082 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS Mailing Address 4273 BROGDAN FAF		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BUFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code GA 30518 C Occupation TECHNICAL SPECIALIST	Amount of Each Receipt this Period 25.00
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional).	Aggregate Year-to-Date ▼ 375.00	75.00

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 303 (check only one) X
or for commercial p	pied from such Reports and State ourposes, other than using the na MMITTEE (In Full) ALTH SOLUTIONS INC. PO	ame and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee. a. Medco Health PAC)
CALVIN BINGHA Mailing Address City SHAWNEE FEC ID number federal political	r of contributing committee. yer ALTH GROUP General		Zip Code 66216 IIICAL OPS Year-to-Date 375.00	Date of Receipt M M M O D D O D 2008 Transaction ID: INC.A.50966 Amount of Each Receipt this Period 25.00
Full Name (Las BRYAN BIRCH Mailing Address City WESTPORT FEC ID number federal political	t, First, Middle Initial) S 4 WINDRUSH LANE T of contributing committee. Ver TH SOLUTIONS General		Zip Code 06880 n PRES, EMPLOYER GROUI Year-to-Date ▼	Date of Receipt M M O T O D O D O O D O O D O O D O O D O O O D O O O D O
MS CHRISTINE Mailing Address City MOUNT LAU FEC ID number federal political	PREL of contributing committee. yer TH SOLUTIONS General	State NJ C Occupation DIR HR Aggregate	Zip Code 08054 Year-to-Date ▼ 450.00	Date of Receipt M M M O 7 O 5 2 0 0 8 Transaction ID: INC.A.50922 Amount of Each Receipt this Period 15.00
SUBTOTAL of Re	eceipts This Page (optional))	232.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 303 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LA	NE	Date of Receipt
City DEEPHAVEN	State Zip Code MN 55331	Transaction ID: INC.A.50871 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	50.00
Receipt For: Primary General Other (specify)	SVP CLIENT & MKT STRATEGIC DE Aggregate Year-to-Date ▼ 750.00	<u> </u>
Full Name (Last, First, Middle Initial) MR MARK BLAKE Mailing Address 129 NORWOOD AV	/ENUE	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50928
MONTCLAIR	NJ 07043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	VP BUSINESS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN		Date of Receipt
Mailing Address 50 NEW ENGLAND	D DR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50712
RAMSEY FEC ID number of contributing federal political committee.	NJ 07446	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING & PRODUCT DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optiona) >	150.00
TOTAL This Period (last page this line num	ber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 303 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to NC. POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KEN BODMER Mailing Address P.O. BOX 381947 City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP	State Zip Code TN 38183 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	SVP FINANCE Aggregate Year-to-Date ▼ 2880.00	
Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA Mailing Address 80 LEONA CT	•	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50874
LEVITTOWN	NY 11756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MRS HEATHER BONOME Mailing Address 305 10TH STREE	T NE	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50676
WASHINGTON FEC ID number of contributing federal political committee.	DC 20002	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option	nal)	242.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	•)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA			Date of Receipt
Mailing Address 109 ARBOR PL			07 05 2008
City	State	Zip Code	Transaction ID: INC.A.50586
BRYN MAWR FEC ID number of contributing federal political committee.	C	19010	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
Mailing Address 3380 SADDLEBRO	OK STREET		07 05 2008
City LAS VEGAS	State NV	Zip Code 89141	Transaction ID: INC.A.50525 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00141	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n IRM PRACTICE	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) RUSS BOURNE			Date of Receipt
Mailing Address 242 N HIGHLAND			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38111	Transaction ID: INC.A.50979 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30111	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio VP SALE		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional	l)	······	100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
MS SALLIE BOWDEN Mailing Address 5259 FISHERCRES	ST LN	Date of Receipt 0 7 0 5 2 0 0 8
City <u>RICHMOND</u>	State Zip Code VA 23231	Transaction ID: INC.A.50830 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORMULARY CONSULTING	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	
Full Name (Last, First, Middle Initial) KAREN BOWE		Date of Receipt
Mailing Address 177 N. MILL ROAD		07 05 7 2008
City	State Zip Code	Transaction ID: INC.A.50949
HARRISBURG FEC ID number of contributing federal political committee.	PA 17112	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP COMMUNITY AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN		Date of Receipt
Mailing Address 15 DAWN LANE		0 7 0 5 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RINGWOOD	State Zip Code NJ 07456	Transaction ID: INC.A.50868 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR STRAT PRODUCT MGM	Т
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optiona	J)	255.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee. E (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS GWEN BRADY Mailing Address 219 E. COMO AVEN City	UE State Zip Code	Date of Receipt M
COLUMBUS FEC ID number of contributing federal political committee.	OH 43202	Amount of Each Receipt this Period 12.50
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR BUSINESS PLANNING Aggregate Year-to-Date 375	5.00
Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM Mailing Address 210 FROG HOLLOW	/ ROAD	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50818
COATESVILLE FEC ID number of contributing federal political committee.	PA 19320	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP INFO & PROCESS ENGIN Aggregate Year-to-Date 1125	
Full Name (Last, First, Middle Initial) MR DAVID BREEN		Date of Receipt
Mailing Address 27 SEALS DR		07 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONROE	State Zip Code NY 10950	Transaction ID: INC.A.50800 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANALYTICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5.00
SUBTOTAL of Receipts This Page (optional)		112.50

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 303 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements mage name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt
Mailing Address 136 BEECH ST			07 05 2008
City	State	Zip Code	Transaction ID: INC.A.50655
BELLEVILLE	NJ	07109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIE	n ENT/MEMBER COMM	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	375.00	
Full Name (Last, First, Middle Initial) MR PAUL BRISSON	1		Date of Receipt
Mailing Address 469 MANOR LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50648
PELHAM MANOR	NY	10803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	n DDUCT DEVELOPMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER			Date of Receipt
Mailing Address 9 ROMARY COURT			07 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50561
GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n FINANCE	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	375.00	
	1		75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 303 (check only one) X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	C. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR KENNETH BROWN Mailing Address 540 GIORDANO DI	RIVE	Date of Receipt
City	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50583
YORKTOWN HEIGHTS	NY 10598	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTERPRISE BUS INTELLIGENO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) STEVEN BROWN		Date of Receipt
Mailing Address 140 S GROVE PAF	RK	07 05 2008
City	State Zip Code	Transaction ID: INC.A.50968
MEMPHIS	TN 38117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRODUCT LINE II	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) MS VIVIAN BULGER		Date of Receipt
Mailing Address 120 EAST MAIN ST	Γ	07 / 05 / Y Y Y Y Y Y
City WASHINGTONVILLE	State Zip Code NY 10992	Transaction ID: INC.A.50796 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	ı)	95.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
Full Name (Last, First, Middle Initial) AMANDA BUNDY			Date of Receipt
Mailing Address 5812 SEVEN POINTS	TRACE		M M / D D / Y Y Y Y Y Y O S 0 5 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.50959
HERMITAGE	TN	37076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio VP REIM	n IBURSEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) BRIAN BURFORD			Date of Receipt
Mailing Address 603 CHARLESWOOD	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50958
MARION	AR	72364	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR BUS		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt
Mailing Address 25 TIMBERLAND			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50696
ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)			125.00

TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS PEGEEN BUTTERFIELD			Date of Receipt
Mailing Address 23 NUTTING PLAC	E		07 05 YYYYY 2008
City WEST CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.50623 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS DEVELOPMENT	
Receipt For: Primary General Other (specify)	 	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER			Date of Receipt
Mailing Address 441 S ELM STREE	Т		07 05 7 2008
City MAYWOOD	State NJ	Zip Code 07607	Transaction ID: INC.A.50522 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07007	40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI			Date of Receipt
Mailing Address 119 WASHINGTON	N AVENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CHATHAM	State NJ	Zip Code 07928	Transaction ID: INC.A.50776 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07320	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	n ONTROLLER	1
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optiona	l)		115.00

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 303 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI			Date of Receipt
Mailing Address 24 SHERI DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.50790 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		52.50
Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP	n VP MARKET STRATEGY &	DEV
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 787.50	
Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR			Date of Receipt
Mailing Address 9788 LIPSEY CV			07 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.50755
FEC ID number of contributing federal political committee.	C	30139	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR SPE	n CIALTY OPS CUST SVC	
Receipt For: Primary General Other (specify) ▼	- + +	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS MARY CASALE			Date of Receipt
Mailing Address 822 CEDAR AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HADDENFIELD	State NJ	Zip Code 08033	Transaction ID: INC.A.50701 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	n ES STRATEGY & MARKETIN	— √G
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		102.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 303 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS KAREN CATHCART RUSSELL Mailing Address 148 CLUBHOUSE		Date of Receipt 0 7 0 5 7 2 0 0 8
City WEST COLUMBIA	State Zip Code SC 29172	Transaction ID: INC.A.50549 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation SR DIR CLINICAL SVCS Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIS	STA	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50685
VERADALE FEC ID number of contributing federal political committee.	WA 99037	Amount of Each Receipt this Period 10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE		Date of Receipt
Mailing Address 130 WEST 67TH S	TREET, #4J	07 05 7 2008
City	State Zip Code	Transaction ID: INC.A.50895
NEW YORK FEC ID number of contributing federal political committee.	NY 10023	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	n	60.00

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person	
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT COOK Mailing Address 270 S FRANKLIN T	URNPIKE	Date of Receipt
City RAMSEY	State Zip Code NJ 07446	Transaction ID: INC.A.50576 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	25.00
Receipt For: Primary General Other (specify)	DIR HLTH CARE OPS-TECHNOLOGY Aggregate Year-to-Date ▼ 375.00	Y
Full Name (Last, First, Middle Initial) JEFFREY COOLE Mailing Address 1280 RIVER HOLLO	OW COVE	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50957
CORDOVA	TN 38016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX AND REGULATORY REPOR	<u></u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) ANTONIO CORREIA		Date of Receipt
Mailing Address 19 WILLIAMS LANI	=	07 05 YYYYY 2008
City CHAPPAQUA	State Zip Code NY 10514	Transaction ID: INC.A.50930
FEC ID number of contributing federal political committee.	C 10314	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optiona	l) >	125.00

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11			
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person ng the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
Full Name (Last, First, Middle Initial)	NC. POLITICAL ACTION COMMITTEE (a.k.a.	, 			
MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TR		Date of Receipt M M M			
City <u>SPARTA</u>	State Zip Code NJ 07871	Transaction ID: INC.A.50675 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHARMACY NETWORK MGMT				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00				
Full Name (Last, First, Middle Initial) MR HART COVEN	1	Date of Receipt			
Mailing Address 28 OAK LANE	Mailing Address 28 OAK LANE				
City MORRISTOWN	State Zip Code NJ 07960	Transaction ID: INC.A.50766			
FEC ID number of contributing federal political committee.	NJ 07960	Amount of Each Receipt this Period 50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY				
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 750.00				
Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA C	ATALINA DR	Date of Receipt			
City	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50659			
SCOTTSDALE	AZ 85255	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	60.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PRODUCT				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00				
SUBTOTAL of Receipts This Page (option	nal)	160.00			
TOTAL This Period (last page this line no	umber only)				

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persible name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.:	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PETER CSUTOROS Mailing Address 16 PLEASANT AVEL City LINCOLN PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	`	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO Mailing Address 19 IDA COURT City STATEN ISLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 10312 C Occupation DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) MR JOHN DALY Mailing Address 46 BLUEBELL CT City PARAMUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07652 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 303 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person of the name and address of any political committee to the NC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL Mailing Address 17 DEVONSHIRE	DRIVE	Date of Receipt 0 7 0 5 2 0 0 8
City RANDOLPH FEC ID number of contributing	State Zip Code NJ 07869	Transaction ID: INC.A.50772 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) General	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 2903 CHUKKAR (COURT	Date of Receipt 0 7 0 5 2 0 0 8
City PLANT CITY	State Zip Code FL 33567	Transaction ID: INC.A.50748 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation VP/GM Aggregate Year-to-Date ▼ 750.00	25.00
Full Name (Last, First, Middle Initial) MR ANDREW DAVIS Mailing Address 5616 BROOK DR	IVE	Date of Receipt
City EDINA	State Zip Code MN 55439	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50657
FEC ID number of contributing federal political committee.	C 33439	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEDICARE CLIENT & SALES SU	P
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	nal)	100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (check only one)
NAME OF COMMITTEE (In Full)		any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) WARREN DAVIS Mailing Address 3131 SADDLEGAIT		Date of Receipt
City GERMANTOWN	State Zip Code TN 38138	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50978 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP	Occupation	25.00
ACCREDO HEALTH GROUP Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	DIR FINANCE II Aggregate Year-to-Date ▼	5.00
Full Name (Last, First, Middle Initial) MR DANIEL DAVISON Mailing Address 402 HIGHLAND AV	E.	Date of Receipt M
City	State Zip Code	Transaction ID: INC.A.50791
RIDGEWOOD FEC ID number of contributing federal political committee.	NJ 07450	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SVP FINANCIAL PLANNING Aggregate Year-to-Date ▼	i
Primary General Other (specify) ▼		0.00
Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS		Date of Receipt
Mailing Address W62 N1032 FAIRH	AVEN CT	07
City	State Zip Code WI 53012	Transaction ID: INC.A.50722
CEDARBURG FEC ID number of contributing federal political committee.	WI 53012	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5.00
SUBTOTAL of Receipts This Page (optional	l)	100.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 303 (check only one) X
or for commercial purposes, o	ther than using the name and ad In Full)	y not be sold or used by any person dress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mid		TOTION COMMITTEE (a.m.c	,
MR PAUL DELLO RUSSO Mailing Address 80 HIL	LSIDE AVENUE		Date of Receipt 0 7 0 5 2 0 0 8
City GLEN RIDGE	State NJ	Zip Code 07028	Transaction ID: INC.A.50694 Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUT	TIONS Occupation ASST Co	on OUNSEL	
Receipt For: Primary Ge Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Mid MS TONI DEMANSS Mailing Address 32 RE			Date of Receipt 0 7 0 5 2 0 0 8
City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: INC.A.50903
FEC ID number of contributed rederal political committee.		07400	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUT	Occupation DIR FINA		
Receipt For: Primary Ge Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Mid MS ANN-MARGARET DEM.			Date of Receipt
Mailing Address 1 RUG	BY ROAD		07 05 7 2008
City CEDAR GROVE	State NJ	Zip Code 07009	Transaction ID: INC.A.50577 Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee.		1 1 1 1 1	25.00
Name of Employer MEDCO HEALTH SOLUT	Occupation DIR FIN.		
Receipt For: Primary Ge Other (specify)	Aggregate	e Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This	s Page (optional)		75.00
TOTAL This Period (last page	ge this line number only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 303 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personne name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY Mailing Address 17 RICHWOOD PLA City DENVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07834 C Occupation DIR MEDICARE COMPLIANCE Aggregate Year-to-Date 375.00	Date of Receipt M M M O D D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial) DONNA DENARDO Mailing Address W2996 GIBRALTER City FISH CREEK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	ROAD State Zip Code WI 54212 C Occupation SVP & GENERAL MGR MEDICARE Aggregate Year-to-Date 2884.50	Date of Receipt M M M O D D O 2 0 0 8 Transaction ID: INC.A.50936 Amount of Each Receipt this Period 192.30
Full Name (Last, First, Middle Initial) MR JOHN DERRICO Mailing Address 195 HACKENSACK A City HARRINGTON PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07640 C Occupation SR DIR MARKETING Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		242.30

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LAURA DEVEAU Mailing Address 2289 BEDFORD S	ST APT D2		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City STAMFORD FEC ID number of contributing	State CT	Zip Code 06905	Transaction ID: INC.A.50713 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) General	Occupation AVP MAR	RKETING Year-to-Date ▼ 375.00]
Full Name (Last, First, Middle Initial) MS KAREN DEZEARN Mailing Address 3625 PATTERSTO	ONE DR		Date of Receipt 0 7 0 5 2 0 0 8
City ALPHARETTA FEC ID number of contributing	State GA	Zip Code 30022	Transaction ID: INC.A.50551 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) General	Occupation SR NATL	ACCT EXEC Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR WILLIS DINGLE Mailing Address 905 SW SCRUB (DAK AVE		Date of Receipt
City PALM CITY FEC ID number of contributing federal political committee.	State FL	Zip Code 34990	Transaction ID: INC.A.50622 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	_	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 675.00	
SUBTOTAL of Receipts This Page (option	al)		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ANDREW DOEDYNS Mailing Address 117 CREST DRIVE			Date of Receipt 0 7 0 5 2 0 0 8
City BEAVER FEC ID number of contributing federal political committee.	State PA	Zip Code 15009	Transaction ID: INC.A.50947 Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	- 	n NICAL OPS Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR ROBERT DOLAN Mailing Address 9 CRANE AVENUE			Date of Receipt 0 7 0 5 2 0 0 8
City WEST CALDWELL FEC ID number of contributing	State NJ	Zip Code 07006	Transaction ID: INC.A.50773 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) ▼	Occupation DIR TEC	n HNOLOGY Year-to-Date ▼]
Full Name (Last, First, Middle Initial) MS MERIDITH DORNER Mailing Address 4448 CREEK ROAD			Date of Receipt
City ALLENTOWN FEC ID number of contributing	State PA	Zip Code 18104	Transaction ID: INC.A.50567 Amount of Each Receipt this Period 25.00
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ACCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional))		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE	Date of Receipt			
	Mailing Address 58 INDEPENDENCE \	07 05 7 2008			
	City MORRIS TWP	State NJ	Zip Code 07960	Transaction ID: INC.A.50887 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	07000	192.30	
	Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP ENTERPRISE BUS INTELLIGENCE			— IC€	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1538.40		
- В.	Full Name (Last, First, Middle Initial) MR DANA DUNCAN	Date of Receipt			
	Mailing Address 125 COMSTOCK TRA	07 05 2008			
			Zip Code	Transaction ID: INC.A.50705	
			06424	Amount of Each Receipt this Period 25.00	
			on TECHNOLOGY		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00		
- С.	Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY			Date of Receipt	
	Mailing Address 2 DECKER TERRACE	M M / D D / Y Y Y Y Y Y O D D D D D D D D D D D D D			
	City	State	Zip Code	Transaction ID: INC.A.50589	
	KINNELON NJ 0740 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR FINANCE		07405	Amount of Each Receipt this Period 25.00	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00		
	SUBTOTAL of Receipts This Page (optional)			242.30	
f	TOTAL This Period (last page this line number	only)			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY Mailing Address 14026 KNOX STRE City OVERLAND PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code KS 66221 C Occupation VP SALES SEGMENT LEADER Aggregate Year-to-Date	Date of Receipt M M M C D D C C D C C D C C D C C D C C D C C D C C D C C D C C D C C D C
Other (specify) ▼ Full Name (Last, First, Middle Initial) MR MARK DUNN Mailing Address 2 OLD MILL ROAD City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SANDY HOOK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	CT 06482 C Occupation SR DIR TECHNOLOGY	Amount of Each Receipt this Period 25.00
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR SUMIT DUTTA	Aggregate Year-to-Date ▼ 375.00	Date of Receipt
Mailing Address 534 HUDSON STR #3C City NEW YORK FEC ID number of contributing federal political committee.	State Zip Code NY 10014	Transaction ID: INC.A.50703 Amount of Each Receipt this Period 77.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP & GENERAL MGR Aggregate Year-to-Date 1155.00	
SUBTOTAL of Receipts This Page (optional	l)	152.00

GERMANTOWN TN 38138 Amount of Each Receipt th FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary		\vdash \vdash \vdash	Use separate schedule(s) for each category of the Detailed Summary Page	orm 3X)	SCHEDULE A (FEC Form TEMIZED RECEIPTS	
A. Full Name (Last, First, Middle Initial) REBECOA DYER Mailing Address 1400 POPLAR ESTATES PKY City State Zip Code TN 38138 FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Primary General Other (specify) ▼	ontributions	olicit contributions from such committee.	lress of any political committee to so	than using the name and add	or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	or for co
Mailing Address 1400 POPLAR ESTATES PKY City State Zip Code TN 38138 FEC ID number of contributing federal political committee. Name of Employer MCCREDO HEALTH GROUP City State Zip Code Transaction ID: INC.A.50 Amount of Each Receipt th Dire PROJECT MGMT Aggregate Year-to-Date ▼ Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt To: Aggregate Year-to-Date ▼ Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Amount of Each Receipt th Date of Receipt Transaction ID: INC.A.50 Amount of Each Receipt th Date of R			TOTO O CONTINUE FEE (a.K.a. I		Full Name (Last, First, Middle Initial)	Full N
GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer MCCREDO HEALTH GROUP Primary General Other (specify) ▼ Primary General Other (specify) ▼ Date of Receipt Tor: Pull Name (Last, First, Middle Initial) MR MICHAEL EDWARDS Mailing Address 109 KAREN PLACE City State Zip Code NJ 07481 Cupper MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Date of Receipt Montrol Distributing federal political committee. Cupper Mailing Address 128 SUMMIT AVENUE City State Zip Code NJ 07481 Date of Receipt Toring Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Toring Transaction ID: INC.A.50 Amount of Each Receipt the Transaction ID: INC.A.50 Amount of Each Receipt Toring Transaction ID: INC.A.50 Amount of E	2008	07 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		LAR ESTATES PKY	Mailing Address 1400 POPLAR E	Mailir
FEC ID number of contributing federal political committee. Name of Employer ACCRECO HEALTH GROUP Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address 109 KAREN PLACE City State Zip Code WYCKOFF NJ 07481 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address 128 SUMMIT AVENUE City State Zip Code NJ 07481 FEC ID number of contributing federal political committee. Name of Employer Medical Summittee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. Name of Employer Medical Committee. Primary General Occupation NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDICAL OFFICER Receipt For: Primary General Occupation MEDICARE CHIEF MEDICAL OFFICER Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Transaction ID: INC.A.5C Amount of Each Receipt the Name of Employer MEDICAL OFFICER Receipt For: Primary General Occupation MEDICARE CHIEF MEDICAL OFFICER Aggregate Year-to-Date ▼ Tansaction ID: INC.A.5C		Transaction ID: INC.A.50967	·			-
Receipt For:	25.00		38138		FEC ID number of contributing	FEC
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS Mailing Address 109 KAREN PLACE City State Zip Code WYCKOFF NJ 07481 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code NJ 0750.00 Date of Receipt Transaction ID: INC. A.5C Amount of Each Receipt th Primary General Occupation VP/GM Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code NJ 07043 FEC ID number of contributing federal political committee. NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDICARE CHIEF MEDICAL OFFICER Aggregate Year-to-Date ▼ Occupation MEDICARE CHIEF MEDICAL OFFICER Aggregate Year-to-Date ▼				· '	Name of Employer ACCREDO HEALTH GROUP	Name ACC
MR MICHAEL EDWARDS Mailing Address 109 KAREN PLACE City State Zip Code WYCKOFF NJ 07481 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. NJ 07043 Transaction ID: INC.A.50 Amount of Each Receipt M M M / 0 D D / Y 0 7 D D /					Primary General	
City State Zip Code NJ 07 0.5 WYCKOFF NJ 07481 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ FUII Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code Transaction ID: INC.A.50 Mailing Address 128 SUMMIT AVENUE City State Zip Code Transaction ID: INC.A.50 Medical Committee C NJ 07 0.5 Transaction ID: INC.A.50 Amount of Each Receipt To Transaction ID: INC.A.50 Amount of Each Receipt the	YYY	1			MR MICHAEL EDWARDS	MR M
WYCKOFF NJ 07481 Amount of Each Receipt th FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Amount of Each Receipt th C C Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	2008	07 05 2008				
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Aggregate Year-to-Date Primary General 750.00 Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code Transaction ID: INC.A.50 UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General 750.00		Transaction ID: INC.A.50582	•			•
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Aggregate Year-to-Date ▼	50.00		07401		FEC ID number of contributing	FEC
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Aggregate Year-to-Date ▼ 750.00 Date of Receipt M M M O D D O O O O O O O O O O O O O O			١	Occupation VP/GM	Name of Employer MEDCO HEALTH SOLUTIONS	Name MED
DR WOODY EISENBERG, MD Mailing Address 128 SUMMIT AVENUE City State Zip Code UPPER MONTCLAIR FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Date of Receipt M M M / D D D / Y 0 7 0 5 Transaction ID: INC.A.50 Amount of Each Receipt th C Aggregate Year-to-Date 750.00			1 1 1 1 1 1 1 1		Primary General	Rece
City State Zip Code Transaction ID: INC.A.50 UPPER MONTCLAIR NJ 07043 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General State Zip Code Transaction ID: INC.A.50 Amount of Each Receipt th Occupation MEDICARE CHIEF MEDICAL OFFICER Aggregate Year-to-Date ▼		M M / D D / Y Y Y		,	DR WOODY EISENBERG, MD	DR W
UPPER MONTCLAIR NJ 07043 Amount of Each Receipt th C Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Amount of Each Receipt th Amount of Each Receipt th	2008		Zin Code	State	City	City
Table 1		Amount of Each Receipt this Period	•		•	•
MEDICARE CHIEF MEDICAL OFFICER Receipt For: Primary General MEDICARE CHIEF MEDICAL OFFICER Aggregate Year-to-Date ▼	50.00	50.0		C		
Primary General 750.00		 R		Q 1 '	Name of Employer MEDCO HEALTH SOLUTIONS	Name MED
				55 5	Primary General	Rece
SUBTOTAL of Receipts This Page (optional)	125.00	125.0)	ue (optional)	SUBTOTAL of Receipts This Page (opt	SUBTO

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any person he name and address of any political committee to s POLITICAL ACTION COMMITTEE (a.k.a.	colicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON Mailing Address 106 GRAHAM TERF		Date of Receipt
		07 05 2008
City	State Zip Code NJ 07663	Transaction ID: INC.A.50763
SADDLE BROOK FEC ID number of contributing federal political committee.	NJ 07663	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN	1	Date of Receipt
Mailing Address 359 LONG HILL RO	AD EAST	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BRIARCLIFF MANOR	State Zip Code NY 10510	Transaction ID: INC.A.50909 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	-
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN		Date of Receipt
Mailing Address 75 TWEED BLVD		07 05 YYYYY 2008
City	State Zip Code	Transaction ID: INC.A.50514
UPPER GRANDVIEW	NY 10960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SVP MEDICAL&ANLYTC AFFRS	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.65	
SUBTOTAL of Receipts This Page (optional)		267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 40 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and address o	f any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT Mailing Address 11540 39TH AVE N City PLYMOUTH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)			Date of Receipt M M M O D D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS Mailing Address 100 WINSTON DRIVE 17 C NORTH City CLIFFSIDE PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zi		Date of Receipt M M M D D D 2 2 0 0 8 Transaction ID: INC.A.50858 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATER City LITHIA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zi		Date of Receipt M M C D D C 2008 Transaction ID: INC.A.50600 Amount of Each Receipt this Period 15.00
SUBTOTAL of Receipts This Page (optional)			55.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a committee. POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) RICHARD FARIS Mailing Address 2020 HEATHER CC City MEMPHIS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General	State Zip Code TN 38119 C Occupation VP HEALTH OUTCOME SOLUTIONS Aggregate Year-to-Date	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSWOO City MEMPHIS FEC ID number of contributing federal political committee.	OD COVE State Zip Code TN 38119	Date of Receipt M M O 7 D D O 2 D O 8 Transaction ID: INC.A.50954 Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	Occupation VP CLIENT SLS AND MGD CARE Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR City MAHWAH FEC ID number of contributing federal political committee.	State Zip Code NJ 07430 C	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP CARE ENHANCING SOLUTIONS Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional		150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 303 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL Mailing Address 58 APPLE HILL DR			Date of Receipt M
City GILLETTE FEC ID number of contributing federal political committee.	State NJ	Zip Code 07933	Transaction ID: INC.A.50697 Amount of Each Receipt this Period 192.23
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	 	RP MKTG & E-COMM 9 Year-to-Date ▼ 2691.22	
Full Name (Last, First, Middle Initial) MR STUART FELDMAN Mailing Address 109 MEADOWBRC	OOK ROAD		Date of Receipt 0 7 0 5 2 0 0 8
City RANDOLPH FEC ID number of contributing	State NJ	Zip Code 07869	Transaction ID: INC.A.50512 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	- 	n R E-COMM STRAT & DELIV Year-to-Date ▼ 375.00	Z5.00
Full Name (Last, First, Middle Initial) MS DAWN FELDNER Mailing Address 275 BIRCH STREE	т		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EMERSON EEC ID number of contributing	State NJ	Zip Code 07630	Transaction ID: INC.A.50831 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS REQUIREMENTS	25.00
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	ال		242.23

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions
	NC. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO Mailing Address 464 SPRING AVE		Date of Receipt 0 7 0 5 2 0 0 8
City <u>RIDGEWOOD</u>	State Zip Code NJ 07450	Transaction ID: INC.A.50792 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) RONALD FIELMANN		Date of Receipt
Mailing Address 2061 ARLEEN CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCHAUMBURG	State Zip Code	Transaction ID: INC.A.50955
FEC ID number of contributing federal political committee.	IL 60194	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SALES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MR DON FISCHER		Date of Receipt
Mailing Address 10 TRACY CIRCL	E	07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CAMPBELL HALL	State Zip Code NY 10916	Transaction ID: INC.A.50590 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option	nal)	75.00
TOTAL This Period (last page this line nu	mber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 303 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P.			
MEDCO REALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Wedco nealth PAC)
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER			Date of Receipt
Mailing Address 465 OLD STONE RD			07 05 2008
City	State	Zip Code	Transaction ID: INC.A.50642
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL PROD INTEGRATION	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS			Date of Receipt
Mailing Address 1933 MT. OLIVE AGOSTA ROAD			07 05 Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50738
NEW BLOOMINGTON	OH	43341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n HLTH CARE OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) CHAD FOREMAN			Date of Receipt
Mailing Address 9544 DOGWOOD EST	ATES		07 05 7 4 9 9
City	State	Zip Code	Transaction ID: INC.A.50981
GERMANTOWN	TN	38139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR FINA		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KEVIN FRANCO Mailing Address 648 RIVERSIDE DR #222 City MEMPHIS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State TN C Occupation VP FINAl Aggregate		Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50809 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL City TROPHY CLUB FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State TX C Occupation VP NATIO	Zip Code 76262 n ONAL SERVICE CENTER Year-to-Date ▼ 1500.00	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50754 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGANSET City CRANSTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State RI C Occupation DIR GOV	Zip Code 02905 02905 0 / AFFAIRS 9 Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 303 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT FURTH Mailing Address 1450 PORTLAND A City ST PAUL FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State MN C Occupation GENERA		Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50964 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI Mailing Address 24 MOREHOUSE P City NEW PROVIDENCE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation VP & CO		Date of Receipt M M O T O D O C O D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI Mailing Address 720 N. LARRABEE APT 1701 City CHICAGO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 60654 n ENERAL MGR e Year-to-Date •	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))		267.31

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47/303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER			Date of Receipt
Mailing Address 842 ASHLER CT			07 05 2008
City COLUMBUS	State OH	Zip Code 43235	Transaction ID: INC.A.50832 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40200	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO	<u> </u>		Date of Receipt
Mailing Address 69 LAKEVIEW DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OLD TAPPAN	State NJ	Zip Code 07675	Transaction ID: INC.A.50729
FEC ID number of contributing federal political committee.	C	07073	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIF	n NT RELATIONS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
Mailing Address 25 BALLYMEADE	ROAD		M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S
City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.50891
FEC ID number of contributing federal political committee.	C	12333	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/CHI	n EF INFRASTRUCTURE OF	── FR
Receipt For: Primary General Other (specify) ▼	 '	Year-to-Date ▼ 2884.65	
SUBTOTAL of Receipts This Page (option:			267.31

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 303 (check only one) X
or for comme	on copied from such Reports and S rcial purposes, other than using the COMMITTEE (In Full) HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee. a. Medco Health PAC)
MR OMHA	(Last, First, Middle Initial) RAISRIRAM GANGAIKONDAN-IYER dress 9 CAIRNES ROAD			Date of Receipt 0 7 0 5 2 0 0 8
City MORRIS	S PLAINS	State NJ	Zip Code 07950	Transaction ID: INC.A.50898 Amount of Each Receipt this Period
FEC ID nu	imber of contributing itical committee.	C	0,000	25.00
Receipt Fo			n CAL SPECIALIST • Year-to-Date ▼ 375.00]
MR PETER	(Last, First, Middle Initial) R GAYLORD dress 1201 BRIDGE STREE	T		Date of Receipt 0 7 0 5 2 0 0 8
City		State	Zip Code	Transaction ID: INC.A.50510
	PARK Imber of contributing itical committee.	C	07712	Amount of Each Receipt this Period 50.00
Name of E MEDCO H	imployer HEALTH SOLUTIONS	Occupatio SVP TRE	n EASURY & FINANCIAL EVA	18
Receipt Fo			e Year-to-Date ▼ 750.00	
MR FRANK	(Last, First, Middle Initial) GENTILELLA dress 20 BROOKSHIRE DR			Date of Receipt 0 7 0 5 2 0 0 8
City	0)/	State	Zip Code	Transaction ID: INC.A.50620
	Imber of contributing itical committee.	C	08691	Amount of Each Receipt this Period 50.00
Name of E MEDCO H	mployer HEALTH SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	
Receipt Fo			e Year-to-Date ▼ 750.00	
SUBTOTAL	of Receipts This Page (optional)	1		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MATTHEW GIBBS Mailing Address 27 N. WACKER DR. SUITE 246 City CHICAGO FEC ID number of contributing	State IL	Zip Code 60606	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	. '	n ELINICAL OFFICER e Year-to-Date ▼ 1125.00	75.00
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS Mailing Address 544 DENMOOR COUF City GALLOWAY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State OH C	Zip Code 43119 n kRM PRACTICE	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR THOMAS GILSON Mailing Address 2 PELL FARM ROAD	. '	e Year-to-Date ▼ 375.00	Date of Receipt 0 7 0 5 2 0 0 8
City SADDLE RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		Zip Code 07458 n iENERAL MGR e Year-to-Date ▼	Transaction ID: INC.A.50862 Amount of Each Receipt this Period 192.31
SUBTOTAL of Receipts This Page (optional)		0 0 0 0 0 0 0	279.81

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers g the name and address of any political committee to	
MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD	DDIVE	Date of Receipt
Mailing Address 305 BERGAMOT I City	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50515
MEDINA	MN 55340	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES UHG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	
Full Name (Last, First, Middle Initial) MR JONAH GITLITZ		Date of Receipt
Mailing Address 43 OVERLOOK R		07 05 7 2008
City	State Zip Code	Transaction ID: INC.A.50574
OAKLAND	NJ 07436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) MS AUDREY GOODMAN		Date of Receipt
Mailing Address 26 HILLSIDE AVE		07 05 7 2008
City GLEN ROCK	State Zip Code NJ 07452	Transaction ID: INC.A.50810 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ORG DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
CURTOTAL of Receipts This Regar/ention	nal)	257.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 303 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES GORMAN Mailing Address 11 WASHBURN RE)		Date of Receipt 0 7 0 5 2 0 0 8
City CANTON FEC ID number of contributing	State CT	Zip Code 06022	Transaction ID: INC.A.50578 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) General		n CLIENT & MKT PROG STRA Year-to-Date ▼ 375.00	25.00 AT
Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR Mailing Address 1928 BEVERLY LA	NE		Date of Receipt 0 7 0 5 2 0 0 8
City BUFFALO GROVE FEC ID number of contributing federal political committee.	State IL	Zip Code 60089	Transaction ID: INC.A.50635 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n NCIAL INSIGHTS Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR EDWARD GRIX Mailing Address 525 ORANGEBURG	G RD		Date of Receipt 0 7 0 5 2 0 0 8
City PEARL RIVER FEC ID number of contributing	State NY	Zip Code 10965	Transaction ID: INC.A.50652 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n E-COM BUSINESS OPS	25.00
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and addre	ss of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VANE [City CONVENT STATION FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation REGIONAL	Zip Code 07960 . VP SALES-SYSTEMED ear-to-Date ▼	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50690 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD Mailing Address 264 HARVEST AVE City STATEN ISLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 10310 IMER DRIVEN MKTS ear-to-Date ▼ 225.00	Date of Receipt M M M D D D 2008 Transaction ID: INC.A.50569 Amount of Each Receipt this Period 15.00
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR Mailing Address 50 BELLEVUE AVE City SUMMIT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation GROUP CO Aggregate Ye	Zip Code 07901 DO ear-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 303 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and address	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI Mailing Address 67 ATHERTON CT City WAYNE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation DIR TECHNO Aggregate Yea		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MARK HALLORAN Mailing Address 19 KINGS RIDGE RC City LONG VALLEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN Mailing Address 1659 ISABELLA PAR City CHASKA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State MN C	Zip Code 55318 /CS & ADMIN ir-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .			267.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS KELLY HANZAWA			Date of Receipt
Mailing Address 1116 OAKCROFT	LANE		07 05 YYYYY 2008
City SOMERSET	State NJ	Zip Code 08873	Transaction ID: INC.A.50833 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33373	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	T MGMT OPS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW			Date of Receipt
Mailing Address 8 PROSPECT PLA	ACE		0 7 0 5 7 2 0 0 8
City POMPTON PLAINS	State NJ	Zip Code 07444	Transaction ID: INC.A.50560 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0/111	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) SHARON HARRIS			Date of Receipt
Mailing Address 186 N. WHITE STA	ATION RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38117	Transaction ID: INC.A.50956 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00117	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	ו	7
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option:	al)		75.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A or	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P.	name and ad	dress of any political committee to	solicit contributions from such committee.
\ <u></u>	Full Name (Last, First, Middle Initial) MR PETER HARTY Mailing Address 19520 YELLOW WING			Date of Receipt 0 7 0 5 2 0 0 8
	City COLORADO SPRINGS	State CO	Zip Code 80908	Transaction ID: INC.A.50513 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2884.65	
	Full Name (Last, First, Middle Initial) DAN HAYES Mailing Address 4679 AYRON TERRAC	E		Date of Receipt 0 7 0 5 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.50950
	PALM HARBOR FEC ID number of contributing federal political committee.	FL C	34685	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
_	Full Name (Last, First, Middle Initial) MR BILL HEAD			Date of Receipt
	Mailing Address 501 SLATERS LANE #816			07 05 7 2008
	City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID: INC.A.50919 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	EZOTT	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GOV	on V AFFAIRS	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 375.00	
5	SUBTOTAL of Receipts This Page (optional)			267.31
Γ,	FOTAL This Period (last page this line number of	nnly)	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD Mailing Address 13210 N. 11TH AVI	Ε.	Date of Receipt 0 7 0 5 2 0 0 8
City PHOENIX FEC ID number of contributing	State Zip Code AZ 85029	Transaction ID: INC.A.50587 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify)	Occupation VP SALES Aggregate Year-to-Date ▼ 375.00	7
Full Name (Last, First, Middle Initial) MR THOMAS HEKKER Mailing Address 28 WEST THRID S	TREET #1332	Date of Receipt 0 7 0 5 7 2 0 0 8
City SOUTH ORANGE FEC ID number of contributing federal political committee.	State Zip Code NJ 07079	Transaction ID: INC.A.50896 Amount of Each Receipt this Period 20.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 300.00	
Full Name (Last, First, Middle Initial) MR SCOTT HELMUS Mailing Address 23 VALLEY RD		Date of Receipt 0 7 0 5 7 2 0 0 8
City SUCCASUNNA FEC ID number of contributing federal political committee.	State Zip Code NJ 07876	Transaction ID: INC.A.50570 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP CLIENT SOLUTIONS Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional	l)	95.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ERIC HESS Mailing Address 10 CARLTON RD City FLANDERS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07836 C Occupation VP ENGINEERING & OPS Aggregate Year-to-Date 750.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT Mailing Address 35 CASCADE WAY City BUTLER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07405 C Occupation DIR E-COM STRAT & DELIV Aggregate Year-to-Date 375.00	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) SHERLYN HOBGOOD Mailing Address 6635 LAMBERT DR City MASON FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code TN 38049 C Occupation VP BUSINESS UNIT Aggregate Year-to-Date 450.00	Date of Receipt M M M D D D Z D O S Transaction ID: INC.A.50961 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)		125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to so. C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON Mailing Address 1 HERITAGE RD		Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50736
FLORHAM PARK	NJ 07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGIONAL VP PHARMACIES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN		Date of Receipt
Mailing Address 974 HILLCREST RO		07 05 2008
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.50811 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACILITIES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN		Date of Receipt
Mailing Address 9 HIRLE ST		07 05 7 2008
City CORNWALL ON HUDSON	State Zip Code NY 12520	Transaction ID: INC.A.50656 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	I)	125.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting of ror commercial purposes, other than using the name and address of any political committee is solicit contributions from such NAME OF COMMITTEE (in Full) MEDICO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medico Health PAC) Full Name (Last, First, Middle Initial) Mailing Address 41 SAINT RAPHAEL City State Zip Code LAGUNA NIGUEL CA 92677 FEC ID number of contributing federal political committee. Name of Employer MEDICO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ State Zip Code CORDOVA TN 38018 FEC ID number of contributing federal political committee. City State Zip Code CORDOVA TN 38018 FEC ID number of contributing federal political committee. City State Zip Code CORDOVA TN 38018 FEC ID number of contributing federal political committee. City State Zip Code CORDOVA TN 38018 FEC ID number of contributing federal political committee. Company General Office (specify) ▼ Full Name (Last, First, Middle Initial) Any STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City State Zip Code Aggregate Year-to-Date ▼ Primary General Occupation ASSISTANT GENERAL COUNSEL Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City State Zip Code City Full Name (Last, First, Middle Initial) NAME STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City Full Name (Last, First, Middle Initial) NAME STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City Full Name (Last, First, Middle Initial) Name of Employer Primary General Occupation NY 10523 FEC ID number of contributing federal political committee. Name of Employer NY 10523 FEC ID number of contributing federal political committee. Name of Employer NY 10523 FEC ID number of contributing federal political committee. Name of Employer NY 10523 FEC ID number of contributing federal politica	PAGE 59 / 303 11c
A. Full Name (Last, First, Middle Initial) Malling Address 41 SAINT RAPHAEL City State Zip Code LAGUNA NIGUEL CA 92677 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Primary General Other (specify) ▼ 750.00 Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY Mailing Address 9222 RANDLE VALLEY DR City State Zip Code TN 38018 FEC ID number of contributing federal political committee. Name of Employer ACREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼ 750.00 Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: INC Amount of Each Receipt Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Maling Address 49 S HILLSIDE AVE City State Zip Code TN 375.00 Date of Receipt Transaction ID: INC Amount of Each Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: INC Amount of Each Receipt Transaction ID: INC Transacti	a contributions
Receipt For:	2 0 0 8 .A.50725
Balte of Receipt Mailing Address 9222 RANDLE VALLEY DR City CORDOVA TN 38018 FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary Other (specify) ▼ City State Zip Code TN 38018 C C C Amount of Each Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: INC Amount of Each Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: INC Amount of Each Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: INC Amount of Each Receipt Date of Receipt Transaction ID: INC Amount of Each Receipt Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: INC Amount of Each Receipt Date of Receipt Transaction ID: INC Amount of Each Receipt Date of Receipt Date of Receipt Date of Receipt Transaction ID: INC Amount of Each Receipt Transaction ID: INC Date of Receipt Transaction ID: INC Amount of Each Receipt Transaction ID: INC Transaction ID:	
CORDOVA TN 38018 Amount of Each Rece FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City State Zip Code ELMSFORD NY 10523 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Aggregate Year-to-Date ▼ Occupation VP INTERVENTION DELIVERY SYST Aggregate Year-to-Date ▼	2008
FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City State Zip Code NY 10523 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Aggregate Year-to-Date ▼ Date of Receipt M M M O M O D D O D O D D O D D D D D D	
Receipt For: Primary Other (specify) MR STEPHEN HOLODAK Mailing Address General City ELMSFORD FC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Date of Receipt Transaction ID: INC Amount of Each Receipt Occupation VP INTERVENTION DELIVERY SYST Aggregate Year-to-Date	eipt this Period 25.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City State Zip Code ELMSFORD NY 10523 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Occupation VP INTERVENTION DELIVERY SYST Aggregate Year-to-Date ▼	
MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City State Zip Code ELMSFORD NY 10523 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt Transaction ID: INC Amount of Each Receipt Occupation VP INTERVENTION DELIVERY SYST Aggregate Year-to-Date ▼	
City State Zip Code Transaction ID: INC ELMSFORD NY 10523 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: State Zip Code Transaction ID: INC Amount of Each Receipt Inc. C Occupation VP INTERVENTION DELIVERY SYST Aggregate Year-to-Date ▼	2008
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Occupation VP INTERVENTION DELIVERY SYST Aggregate Year-to-Date ▼	
MEDCO HEALTH SOLUTIONS VP INTERVENTION DELIVERY SYST Receipt For: Aggregate Year-to-Date ▼	eipt this Period 80.00
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 1200.00	
SUBTOTAL of Receipts This Page (optional)	155.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CYNTHIA HORN Mailing Address 9553 ANDREW DR City TWINSBURG FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code OH 44087 C Occupation VP CUST SVC Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 0 5 2 0 0 8 Transaction ID: INC.A.50945 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ Mailing Address 30 AVENUE AT PORAPT. 415 City WEST NEW YORK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	RT IMPERIAL State Zip Code NJ 07093 C Occupation VP BUSINESS PLANNING Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) LYNN HOSTMYER Mailing Address 6708 N.W. 112TH City OKLAHOMA CITY FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code OK 73162 C Occupation GENERAL MGR - MULTI BRANCH Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 303 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY HULL			Date of Receipt
	Mailing Address 2616 S 3B'S & K RD		7: 0 !	07 05 2008
	City GALENA	State OH	Zip Code 43021	Transaction ID: INC.A.50741 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n HLTH CARE OPS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 450.00	
- В.	Full Name (Last, First, Middle Initial) MS JANE HULSE	<u> </u>		Date of Receipt
	Mailing Address 95 GORDON RD			07 05 2008
	City	State	Zip Code	Transaction ID: INC.A.50795
	ESSEX FELLS FEC ID number of contributing federal political committee.	C	07021	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		7
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
с.	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL			Date of Receipt
	Mailing Address 730 COLUMBUS AVE	ENUE		07 05 YYYYY 2008
	City NEW YORK	State NY	Zip Code 10025	Transaction ID: INC.A.50517 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BUSI	n NESS DEV	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)	1		130.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 303 (check only one) X
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ 4 .	Full Name (Last, First, Middle Initial) MS SUSAN ITO			Date of Receipt
	Mailing Address 6366 SW 90TH STRE	07 05 YYYY 2008		
	City	State	Zip Code	Transaction ID: INC.A.50527
	GAINESVILLE	FL	32608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR CLINICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
- 3.	Full Name (Last, First, Middle Initial) MS MARIANNE JACKS			Date of Receipt
	Mailing Address 329 MORRIS AVENUE			07 05 7 2008
	City	State	Zip Code	Transaction ID: INC.A.50553
	MOUNTAIN LAKES FEC ID number of contributing federal political committee.		07046	Amount of Each Receipt this Period
				50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		L ACCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	7
	Other (specify) ▼		750.00	
. –	Full Name (Last, First, Middle Initial) MR WILLIAM JACKSON	<u>'</u>		Date of Receipt
	Mailing Address 56 WARREN RD			07 05 YYYY 2008
	City	State	Zip Code	Transaction ID: INC.A.50843
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR MEDICARE OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
Г		1		150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JASON JAMES Mailing Address RR 2 BOX 2036 City CANADENSIS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code PA 18325 C Occupation DIR PHYSICIAN ENGAGEMENT Aggregate Year-to-Date 450.00	Date of Receipt M M J D D J Z D D S Transaction ID: INC.A.50521 Amount of Each Receipt this Period 30.00
Full Name (Last, First, Middle Initial) MR TODD JEFFREY Mailing Address 15 ELIZABETH STF City DUMONT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07628 C Occupation VP PHARM CONTRACT & CONSULT Aggregate Year-to-Date 750.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) ROBERT JINKS Mailing Address 22 PAGE AVE City LYNDHURST FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07071 C Occupation VP BUSINESS REQUIREMENTS Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	130.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 303 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee. a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR WILLIAM JOEL Mailing Address 32 VENTOSA DR City	State Zip Code	Date of Receipt M
MORRISTOWN FEC ID number of contributing federal political committee.	NJ 07960	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR ANALYTICAL SVCS Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD Mailing Address 16357 VICTORIA (CURVE SE	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50686
PRIOR LAKE	MN 55372	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT & MKT PROG STR.	AT
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI		Date of Receipt
Mailing Address 8202 MARSH GLE	N CT	07 05 2008
City	State Zip Code	Transaction ID: INC.A.50789
TAMPA FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARMACY COMPLIAN	NCE NCE
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	al)	110.00

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS BECKY KAUS			Date of Receipt
Mailing Address N81 W18359 TOU	RS DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State WI	Zip Code	Transaction ID: INC.A.50672
MENOMONEE FALLS FEC ID number of contributing federal political committee.	C	53051	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CLINICAL SVCS	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR WILLIAM KEELER			Date of Receipt
Mailing Address 63 MOUNTAIN GL	0 7 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City RINGWOOD	State Zip Code NJ 07456		Transaction ID: INC.A.50873
FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE			Date of Receipt
Mailing Address 995 PINES TERR			M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.50596 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07417	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n VP FINANCE	7
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option:	al)		100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 303 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Δ. Α.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
	Mailing Address 1970 WOODLANDS F	PL		07 05 7 2008
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.50730 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENER/	on AL MGR GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
- В.	Full Name (Last, First, Middle Initial) MR KEVIN KELLY	1		Date of Receipt
	Mailing Address 251 POPLAR AVE			07 05 2008
	City	State	Zip Code	Transaction ID: INC.A.50552
	HACKENSACK FEC ID number of contributing federal political committee.	NJ C	07601	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 375.00]
с. С.	Full Name (Last, First, Middle Initial) MR PETER KENNY			Date of Receipt
	Mailing Address 6040 BOULEVARD E	APT 28G		07 05 YYYYY 2008
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.50834 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	on CT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee of POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LISA KETNER Mailing Address 7 POINT VIEW City OAKLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07436 C Occupation VP MEMBER STRATEGY Aggregate Year-to-Date 750.00	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50718 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MS INNA KHANIN Mailing Address 3403 SPRINGBROO	K DRIVE	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50893
EDISON FEC ID number of contributing federal political committee.	NJ 08820	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation TECHNICAL SPECIALIST	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER		Date of Receipt
Mailing Address 121 CONKLING TOV	VN ROAD	07 05 2008
City CHESTER	State Zip Code NY 10918	Transaction ID: INC.A.50845
FEC ID number of contributing federal political committee.	C 10918	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KENNETH KLEPPER Mailing Address 295 GLEN PLACE City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Zip Code 07417 n CHIEF OPERATING OFFICE 2 Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate	2884.50	
B. RICHARD KLUSOVSKY Mailing Address 1016 FAIRWOOD LA City ACWORTH FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State GA C Occupatio AVP MA	Zip Code 30101 n NAGED CARE 2 Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN Mailing Address 555 FORBUSH STRE City BOONTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio SR DIR (Zip Code 07005 n CLIENT RETAIL e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line numbe		•	242.30

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 303 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	
	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI	-	Date of Receipt
Mailing Address 920 CLARK STREE	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50575
BOWLING GREEN	OH 43402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY		Date of Receipt
Mailing Address 143 DEERFIELD TE	07 05 7 2008	
City	State Zip Code	Transaction ID: INC.A.50604
MAHWAH FEC ID number of contributing federal political committee.	NJ 07430	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PRODUCT	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI		Date of Receipt
Mailing Address 60 BEECH ROAD		07 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50536
RANDOLPH FEC ID number of contributing federal political committee.	NJ 07869	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)		100.00

or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions
/ MEDGO HEALTH SOLUTIONS INC	POLITICAL ACTION COMMITTEE (a.k.a.	
Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City FRANKLIN LAKES FEC ID number of contributing federal political committee.	State Zip Code NJ 07417	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP E-COM STRATEGY & DELIVERY Aggregate Year-to-Date ▼ 825.00	,
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD		Date of Receipt 0 7 0 5 7 2 0 0 8
COLLIMBUS	State Zip Code	Transaction ID: INC.A.50821
COLUMBUS FEC ID number of contributing federal political committee.	OH 43221	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGIONAL VP PHARMACIES	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR MANOJ KUMAR Mailing Address 7 SUNRISE WAY		Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50759
TOWACO FEC ID number of contributing federal political committee.	NJ 07082	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)	>	130.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 303 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MATTHEW KUPFERBERG Mailing Address 3235 CAMBRIDGE City BRONX FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State NY C Occupation SR ATTO	Zip Code 10463	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JAMES LANGLEY Mailing Address 10921 MAIN RANG	E TDAII	375.00	Date of Receipt
City LITTLETON FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State CO C Occupation VP REIM	Zip Code 80127 n IBURSEMENT Year-to-Date 750.00	Transaction ID: INC.A.50970 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER Mailing Address 7017 COBALT WAY City CITRUS HEIGHTS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State CA C Occupation SR DIR (Zip Code 95621 GOVERNMENT AFFAIRS Year-to-Date 1875.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 0 5 2 0 0 8 Transaction ID: INC.A.50720 Amount of Each Receipt this Period 125.00
SUBTOTAL of Receipts This Page (optional	l)		200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 303 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	J. POLITICAL A	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
Full Name (Last, First, Middle Initial) JOSEPH LENZ			Date of Receipt
Mailing Address 6 SHERMAN AVE			07 05 2008
City	State	Zip Code	Transaction ID: INC.A.50910
WALDWICK FEC ID number of contributing	NJ C	07463	Amount of Each Receipt this Period 25.00
federal political committee.			_
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PERF	ORMANCE STRATEGY	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	325.00]
Full Name (Last, First, Middle Initial) PATRICIA LETCHWORTH			Date of Receipt
Mailing Address 3133 HEATHSTON	E COVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50971
GERMANTOWN	TN	38138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR REIM	n MBURSEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR ROBERT LONG			Date of Receipt
Mailing Address 18 HARLIND TERR	RACE		07 05 YYYY 2008
City	State	Zip Code	Transaction ID: INC.A.50711
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	. ACCT EXEC	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		750.00	
			100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 303 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personante name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROV City GIBSONIA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code PA 15044 C Occupation VP/GM Aggregate Year-to-Date 675.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS DEBRA LUDGATE Mailing Address 238 WOODLAND A City SUMMIT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	VE State Zip Code NJ 07901 C Occupation SR DIR MARKETING Aggregate Year-to-Date ▼	Date of Receipt M M M O D D O Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) MS VERONA MACMAHON Mailing Address 1504 WEST CULLO UNIT G City CHICAGO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	M AVE State Zip Code IL 60613 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	SR DIR ACCT MGMT OPS Aggregate Year-to-Date ▼ 375.00	80.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A .	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY Mailing Address 764 W. SADDLE RIVI	ER ROAD		Date of Receipt
	City HO HO KUS	State NJ	Zip Code 07423	Transaction ID: INC.A.50646 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO	n DUCT & CHANNEL MKTING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- 3.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO	N DD		Date of Receipt
	Mailing Address 33 HICKORY TAVER	07 05 7 4 9 9		
	City	State	Zip Code	Transaction ID: INC.A.50529
	GILLETTE FEC ID number of contributing federal political committee.	NJ C	07933	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) MS ILENE MARCUS Mailing Address 97 BLUEBERRY DR			Date of Receipt
	City	State	Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50778
	WOODCLIFF LAKE DR	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	- ' '	FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
S	UBTOTAL of Receipts This Page (optional) .			125.00
т	OTAL This Period (last page this line number	r only)	.	

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 303 (check only one) X
or for commerc	ial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	COMMITTEE (In Full) HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A. MR JOSEPH	Last, First, Middle Initial)	A)/E)		Date of Receipt
Mailing Add	ress 351 SOUND BEACH	AVENUE		07 05 7 2008
City		State	Zip Code	Transaction ID: INC.A.50601
OLD GRE		CT	06870	Amount of Each Receipt this Period
	nber of contributing ical committee.	C		25.00
	nployer EALTH SOLUTIONS	Occupation DIR MEI	on DICARE OPS	
Receipt For		Aggregate	e Year-to-Date ▼	
Prima Other	ry	0 0	375.00	
Full Name (Last, First, Middle Initial) IO			Date of Receipt
Mailing Add	ress 31 UNDERWOOD DF	07 / 05 / Y Y Y Y Y Y Y		
City	24105	State	Zip Code	Transaction ID: INC.A.50937
WEST OF		NJ	07052	Amount of Each Receipt this Period
	nber of contributing ical committee.	C		50.00
	nployer EALTH SOLUTIONS		ENERAL COUNSEL	
Receipt For Prima		Aggregate	e Year-to-Date ▼	
	(specify) ▼		750.00	
,	Last, First, Middle Initial) A MARSHALL			Date of Receipt
Mailing Add	ress W144 N7150 TERRA	CE DRIVE		07 05 7 2008
City	NICE CALLS	State	Zip Code	Transaction ID: INC.A.50668
	NEE FALLS	WI	53051	Amount of Each Receipt this Period
	nber of contributing ical committee.	С		50.00
	nployer EALTH SOLUTIONS		L ACCT EXEC	
Receipt For Prima		Aggregate	e Year-to-Date ▼	-
	(specify) ▼		750.00	
SUBTOTAL o	of Receipts This Page (optional)	<u> </u>		125.00
	Period (last page this line number		•	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SHELLY MARTIN Mailing Address 9536 DOE MEADO	W DD	Date of Receipt
City	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50975
GERMANTOWN	TN 38139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) THOMAS MARTIN		Date of Receipt
Mailing Address 1882 E LAUREL H	SLLOW	07 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50972
GERMANTOWN	TN 38139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CORP STRAT BUS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR TODD MARTIN		Date of Receipt
Mailing Address 11825 SHEPPARD	S CROSSING	07 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50629
CLARKSVILLE	MD 21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	
	al)	267.30

SCHEDULE A (FI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/7303 (check only one)
Any information copied from or for commercial purposes	n such Reports and Statements ma , other than using the name and ad	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTE MEDCO HEALTH S	E (In Full) OLUTIONS INC. POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, MR EDWARD MARTINE)	,		Date of Receipt
Mailing Address 35 S	ALTER PLACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MAPLEWOOD	State NJ	Zip Code 07040	Transaction ID: INC.A.50897 Amount of Each Receipt this Period
FEC ID number of contr federal political committee	ibuting	070-10	25.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation SR DIR	on PRODUCT MGMT	
Receipt For: Primary Other (specify) ▼		e Year-to-Date ▼ 375.00	
Full Name (Last, First, MR ROBERT MATCHET			Date of Receipt
Mailing Address 27 L			M M / D D / Y Y Y Y O S 2008
City SUSSEX	State NJ	Zip Code 07461	Transaction ID: INC.A.50585 Amount of Each Receipt this Period
FEC ID number of contr federal political committee	ibuting	07401	25.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation	on CHNOLOGY	
Receipt For: Primary Other (specify) ▼		e Year-to-Date ▼ 375.00	
Full Name (Last, First, MMR JEFFREY MAY	Middle Initial)		Date of Receipt
-	WASHINGTON AVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HILLSDALE	State NJ	Zip Code 07642	Transaction ID: INC.A.50812 Amount of Each Receipt this Period
FEC ID number of contre federal political committee	ibuting	07042	192.30
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation SVP DR	on RUG DISTRIB & CONTROL	
Receipt For: Primary Other (specify)	 	e Year-to-Date ▼ 2884.50	
SUBTOTAL of Receipts T	his Page (optional)		242.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 303 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS PATRICIA MAZZONE Mailing Address 56 PENOBSCOT S	ST.		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CLIFTON FEC ID number of contributing federal political committee.	State NJ	Zip Code 07013	Transaction ID: INC.A.50717 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		PRODUCT SVCS Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE Mailing Address 11 JARDINE COUF	RT		Date of Receipt 0 7 0 5 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.50650
MORRIS PLAINS FEC ID number of contributing federal political committee.	NJ C	07950	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALE	s and marketing	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
Full Name (Last, First, Middle Initial) MR DOUG MCCANN			Date of Receipt
Mailing Address 10201 E. 92ND STI	REET N		07 05 YYYY 2008
City	State	Zip Code	Transaction ID: INC.A.50927
OWASSO FEC ID number of contributing federal political committee.	OK C	74055	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	DUCT DEVELOPMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 303 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRIN City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General	State TN C Occupation VP SALE		Date of Receipt M M M / D D / Y Y Y Y Y O 7
Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD Mailing Address 0-45 27TH ST City FAIR LAWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	- 	Zip Code 07410	Date of Receipt M M M / D D / Y Y Y Y Y O 7 0 5 2 0 0 8 Transaction ID: INC.A.50762 Amount of Each Receipt this Period 25.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH Mailing Address 87 ROSELAWN RE City HIGHLAND MILLS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State NY C Occupation ASST GE	Zip Code 10930	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)		2880.00	267.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 303 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA			Date of Receipt
Mailing Address 112 GREEN TERR	ACE WAY		07 05 YYYYY 2008
City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: INC.A.50852 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	n SINESS OPS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2884.65	
Full Name (Last, First, Middle Initial) MS BARBARA MENZEL	<u> </u>		Date of Receipt
Mailing Address 921 AMARYLLIS A	VE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ORADELL	State NJ	Zip Code 07649	Transaction ID: INC.A.50568 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3.010	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	INESS PLANNING & ADMII	
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) DANETTE MEREDITH			Date of Receipt
Mailing Address 600 W 2ND AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DERRY	State PA	Zip Code 15627	Transaction ID: INC.A.50948
FEC ID number of contributing federal political committee.	C	13027	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SAL		
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional			242.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DAVID MILLER Mailing Address 7 CLOVER LANE City RANDOLPH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07869 0R RELATIONS Year-to-Date ▼	Date of Receipt O 7 O 5 2 0 0 8 Transaction ID: INC.A.50534 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MRS KAREN MILLER Mailing Address 34 MACKENZIE LANE City DENVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation EXEC DI	Zip Code 07834 R INTERNAL AUDIT Year-to-Date 450.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR GIOVANNI MINARDI Mailing Address 12 LINCOLN ROAD City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	, '	Zip Code 07405	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			105.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY Mailing Address 106 HAMBURG ROA City PARSIPPANY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify)	State Zip Code NJ 07054 C Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date 375.00	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50541 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MS JULIANA MOLEK Mailing Address 17584 WEXFORD D City EDEN PRAIRIE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	R State Zip Code MN 55347 C Occupation SR DIR SPECIAL MARKETS Aggregate Year-to-Date 375.00	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50636 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE Mailing Address 1320 BRONCO CIR City WARRINGTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code PA 18976 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7
SUBTOTAL of Receipts This Page (optional)		75.00

ITEMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 83 / 303 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY Mailing Address 86 WELLINGTON A	AVENUE		Date of Receipt
City SHORT HILLS FEC ID number of contributing	NJ	Zip Code 07078	Transaction ID: INC.A.50518 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation SVP PHARM Aggregate Year	ACEUTICAL CONTRAC to-Date ▼	192.00 CTING
Full Name (Last, First, Middle Initial) MS THERESA MORMILE Mailing Address 59 VALLEY VIEW	TER	0 0 0 0 0 0	Date of Receipt 0 7 0 5 2 0 0 8
City MONTVALE FEC ID number of contributing federal political committee.		Zip Code 07645	Transaction ID: INC.A.50813 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP FINANCE Aggregate Year		
Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY Mailing Address 2 STONEBRIDGE I	RD		Date of Receipt 0 7 0 5 2 0 0 8
City SPARTA FEC ID number of contributing federal political committee.		Zip Code 07871	Transaction ID: INC.A.50846 Amount of Each Receipt this Period 20.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation SR NATL AC Aggregate Year	r-to-Date ▼	1
Other (specify) ▼		300.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT MULLER			Date of Receipt
	Mailing Address 69 FERN PLACE			07 05 7 2008
	City PARAMUS	State NJ	Zip Code 07652	Transaction ID: INC.A.50823 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP HLTH	n H BUS CLIENT ENROLLMN	<u>г</u>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- В.	Full Name (Last, First, Middle Initial) MS BECKY NAGLE			Date of Receipt
	Mailing Address 64 WALTER AVE			07 05 7 2008
	City	State	Zip Code	Transaction ID: INC.A.50573
	HASBROUCK HEIGHTS FEC ID number of contributing federal political committee.	NJ C	07604	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 375.00	
_ C.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH			Date of Receipt
	Mailing Address PO BOX 523			07 05 YYYYY 2008
	City SUGAR LOAF	State NY	Zip Code 10981	Transaction ID: INC.A.50557
	FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENT	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
t	TOTAL This Period (last page this line number	· only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS ARLENE NELSON Mailing Address 17 GARFIELD PLACE City RIDGEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio VP FINA		Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50602 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY Mailing Address 24 CHEROKEE TRAI City OAKLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio SR DIR I	Zip Code 07436 n MARKET STRATEGY e Year-to-Date ▼	Date of Receipt M M O 7 O 5 2 0 0 8 Transaction ID: INC.A.50710 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL Mailing Address 12001 PEONY CT City TAMPA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State FL C Occupation DIR SEC Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
Full Name (Last, First, Middle Initial)	POLITICAL A	CHON COMMITTEE (a.k.a	i. Medco Health PAC)
MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUTH			Date of Receipt 0 7 0 5 2 0 0 8
City RYE	State NY	Zip Code 10580	Transaction ID: INC.A.50835 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP (
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
Full Name (Last, First, Middle Initial) MR SUNNY OGBONDA			Date of Receipt
Mailing Address 79 LAUREL WOOD C	OURT		07 05 2008
City ROCKAWAY TOWNSHIP	State NJ	Zip Code 07866	Transaction ID: INC.A.50542 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	INESS REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR MELVIN OHL	<u>I</u>		Date of Receipt
Mailing Address 274 E FRANKLIN TPK	ΚE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.50786 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROC	UREMENT & INVENTORY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional))	125.00

TOTAL This Period (last page this line number only)

ITEMIZED REC	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any information copied or for commercial purp	from such Reports and Statement oses, other than using the name ar	s may not be sold or used by any perso d address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMI MEDCO HEALT	, ,	AL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
Full Name (Last, Fi	rst, Middle Initial)		Date of Receipt
Mailing Address	1 LEE DRIVE		07 05 2008
City	Sta	'	Transaction ID: INC.A.50798
NORTH HALED		07508	Amount of Each Receipt this Period
FEC ID number of of federal political com			50.00
Name of Employer MEDCO HEALTH	SOLUTIONS OCCU	pation C DIR TECHNOLOGY	
Receipt For: Primary Other (specify	Aggr General	egate Year-to-Date ▼ 750.00	
Full Name (Last, Fi			Date of Receipt
Mailing Address 4			M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City	Sta		Transaction ID: INC.A.50828
SUFFERN	NY	10901	Amount of Each Receipt this Period
FEC ID number of of federal political com			25.00
Name of Employer MEDCO HEALTH	SOLUTIONS SR I	pation DIR ACCT MGMT OPS	
Receipt For:		egate Year-to-Date	
Other (specify	General /) ▼	375.00	
Full Name (Last, Fi	rst, Middle Initial)		Date of Receipt
	SCHINDLER CT		M M / D D / Y Y Y Y Y O S 0 5 2 0 0 8
City	Sta	te Zip Code	Transaction ID: INC.A.50914
UPPER SADDLI		07458	Amount of Each Receipt this Period
FEC ID number of of federal political com			25.00
Name of Employer MEDCO HEALTH	SOLUTIONS OCCL	pation HNICAL SPECIALIST	
Receipt For:		egate Year-to-Date ▼	
Other (specify	General	375.00	
SUBTOTAL of Recei			100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS NATALYA ONIK Mailing Address 1 SCHINDLER CT City UPPER SADDLE RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) —	State Zip Code NJ 07458 C Occupation DIR TECHNOLOGY Aggregate Year-to-Date ▼ 375.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA Mailing Address 4 TEAK COURT City RINGWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07456 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y 0 7 2 0 0 8 Transaction ID: INC.A.50775 Amount of Each Receipt this Period 50.00
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address 185 PASCACK ROA	EXEC DIR TECHNOLOGY Aggregate Year-to-Date ▼ 750.00	Date of Receipt
City PARK RIDGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07656 C Occupation GROUP COO	Transaction ID: INC.A.50774 Amount of Each Receipt this Period 50.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	125.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any info	ormation copied from such Reports and S ommercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	ME OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Name (Last, First, Middle Initial) RICHARD PAGANO			Date of Receipt
Maili	ing Address 185 PASCACK RD			07 05 2008
City	RK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC.A.50770
FEC	ID number of contributing ral political committee.	C	0/656	Amount of Each Receipt this Period 25.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS REQUIREMENTS	- 8
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	Name (Last, First, Middle Initial)			Date of Receipt
Maili	ing Address 12 MILLBROOK COUI	07 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City I IV	INGSTON	State NJ	Zip Code 07039	Transaction ID: INC.A.50688 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C	07000	25.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupation VP RETI	n REE SOLUTIONS MKTG	
Rece	eipt For: Primary General Other (specify)	. '	Year-to-Date ▼ 350.00	
	Name (Last, First, Middle Initial)			Date of Receipt
-	ing Address 5 FOXHILL RUN			M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City	NMOUTH JUNCTION	State	Zip Code	Transaction ID: INC.A.50682
FEC	ID number of contributing ral political committee.	C	08852	Amount of Each Receipt this Period 25.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS REQUIREMENTS	-
Rece	eipt For: Primary General Other (specify)	, '	e Year-to-Date ▼ 375.00	
CHET	OTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FEC Form STEEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 303 (check only one)
Any information copied from such Reports or for commercial purposes, other than us	and Statements may ing the name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	INC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JAY PATEL			Date of Receipt
Mailing Address 14 BROWNSTO	NE TERRACE		07 05 YYYY 2008
City HAWTHORNE	State NJ	Zip Code 07506	Transaction ID: INC.A.50902 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-CO	DM STRAT & DELIV	7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt
Mailing Address 2001 MEADOWS	S AVENUE		M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City LANTANA	State TX	Zip Code 76226	Transaction ID: INC.A.50733 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70220	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI			Date of Receipt
Mailing Address 211 WILTSIE CO	DURT		M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.50653 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07461	20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (option	onal)		70.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 303 (check only one) X 11a			
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers ng the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
MEDCO HEALTH SOLUTIONS I	NC. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) JIMMY PERREN		Date of Receipt			
Mailing Address 1250 BRAY PAR		07 05 2008			
City COLLIERVILLE	State Zip Code TN 38017	Transaction ID: INC.A.50952 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	75.00			
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REGULATORY COMPLIANCE				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00				
Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY Mailing Address 4769 STAVANGI	MR MICHAEL PETEROY				
City LAS VEGAS	State Zip Code NV 89147	Transaction ID: INC.A.50757 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRODUCT DEVELOPMENT				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00				
Full Name (Last, First, Middle Initial) MR NATHAN PETERSON		Date of Receipt			
Mailing Address 3412 AUTUMN V	VOODS DRIVE	07 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City CHASKA	State Zip Code MN 55318	Transaction ID: INC.A.50664			
FEC ID number of contributing federal political committee.	MN 55318	Amount of Each Receipt this Period 25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00				
SUBTOTAL of Receipts This Page (option	onal)	125.00			
TOTAL This Period (last page this line no	umber only)				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 303 (check only one) X
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES Mailing Address 8522 UPLAND LN City MAPLE GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MARTINE PFLIEGER Mailing Address 44 HENRY TERR	ACE	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50931
LINCOLN PARK FEC ID number of contributing	NJ 07035	Amount of Each Receipt this Period
federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ATTORNEY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR THOMAS PIERCE		Date of Receipt
Mailing Address 1050 S. CLARKS	ON ST	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50929
DENVER FEC ID number of contributing federal political committee.	CO 80209	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABOR RELATIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optio	nal)	125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 303 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) DR PAGE PIGG			Date of Receipt
Mailing Address 9297 ANGLER TRL	-		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50662
MECHANICSVILLE FEC ID number of contributing federal political committee.	C	23116	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	IICAL SVCS	_
Receipt For: Primary General Other (specify) ▼	- 1 	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN			Date of Receipt
Mailing Address 29 BLACKWELL A	VE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.50530
FEC ID number of contributing federal political committee.	C	07900	Amount of Each Receipt this Period 200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00	
Full Name (Last, First, Middle Initial) MS JANET PORAT			Date of Receipt
Mailing Address 5 CRABAPPLE CT			M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City MONSEY	State NY	Zip Code 10952	Transaction ID: INC.A.50627
FEC ID number of contributing federal political committee.	C	10952	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	HNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	J)		250.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS LYDIA POTTER			Date of Receipt
Mailing Address 19642 S.W. 88 LC	OP		07 05 7 2008
City	State	Zip Code	Transaction ID: INC.A.50836
DUNNELLON FEC ID number of contributing federal political committee.	FL C	34432	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO	I		Date of Receipt
Mailing Address 10258 WINDSOR	WAY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City POWELL	State OH	Zip Code	Transaction ID: INC.A.50742
FEC ID number of contributing federal political committee.	C	43065	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HLTH	n I CARE OPS/FORMULARY/	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE	I		Date of Receipt
Mailing Address 875 ALEXANDRIA	CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.50702
FEC ID number of contributing federal political committee.	C	07440	Amount of Each Receipt this Period 192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2884.50	
SUBTOTAL of Receipts This Page (option	al)		267.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
∠ A .	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET			Date of Receipt
	Mailing Address 135 HOLLYBERRY D	07 05 7 2008		
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.50806 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CONTRACT ADMINISTRAT	— ION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
В.	Full Name (Last, First, Middle Initial) MR MARK PROULX	Date of Receipt		
	Mailing Address 20 BRANDY RIDGE F	07 05 7 2008		
	City	State	Zip Code	Transaction ID: INC.A.50869
	SPARTA FEC ID number of contributing federal political committee.	NJ C	07871	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PH	n ARMACY & CUST SVC OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.65	
- C.	Full Name (Last, First, Middle Initial) SYED QUADRI			Date of Receipt
	Mailing Address 6040 KENNEDY BLVI APT 30N	D EAST		07 05 7 2008
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.50863 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional) .		.	242.31
Ī	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 303 (check only one) X 11a
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt
		01-1-	7's Oads	07 05 2008
	City KELLER	State TX	Zip Code 76248	Transaction ID: INC.A.50886 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
– В.	Full Name (Last, First, Middle Initial) MS FRANCES RAO	Date of Receipt		
	Mailing Address 19 ROSS ROAD	07 05 2008		
	City SCARSDALE	State NY	Zip Code	Transaction ID: INC.A.50554
	FEC ID number of contributing federal political committee.	C	10583	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR REGULATORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00]
С. С.	Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO			Date of Receipt
	Mailing Address 57660 BEAVER VALL	EY RD		07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City QUAKER CITY	State OH	Zip Code 43773	Transaction ID: INC.A.50841 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ELIGIBILITY	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 303 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JOANN REED			Date of Receipt
	Mailing Address 4 ANTLER CT			07 05 7 2008
	City	State	Zip Code	Transaction ID: INC.A.50794
	MATAWAN FEC ID number of contributing	NJ	07747	Amount of Each Receipt this Period
	federal political committee.	C		65.38
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SPECIAL	n LADVISOR TO CEO	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		980.70	
— В.	Full Name (Last, First, Middle Initial) MRS MONICA REED			Date of Receipt
	Mailing Address 8475 DUNHAM STAT	07 05 2008		
	City	State	Zip Code	Transaction ID: INC.A.50699
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	1 RM PRACTICE	
	Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 750.00]
_ С.	Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS			Date of Receipt
	Mailing Address 43 HAROLD ST. UNIT B			07 05 2008
	City COS COB	State CT	Zip Code 06807	Transaction ID: INC.A.50641 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	R RECONCILIATION	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)	1		140.38
 	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers he name and address of any political committee	
MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR VICTOR RENNA		Date of Receipt
Mailing Address 8 CARLA ANN CT		07 05 2008
City FLANDERS	State Zip Code NJ 07836	Transaction ID: INC.A.50838
FEC ID number of contributing federal political committee.	C 07636	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROCUREMENT & INVENTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS		Date of Receipt
Mailing Address 412 RIVER MEWS I	0 7 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: INC.A.50883
EDGEWATER	NJ 07020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) SUZANNE RICHARDS		Date of Receipt
Mailing Address 21357 W 115TH TE	3	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OLATHE	State Zip Code KS 66061	Transaction ID: INC.A.50953
FEC ID number of contributing federal political committee.	KS 66061	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation SR MGR BUS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)	1	145.00

Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC Full Name (Last, First, Middle Initial) MR DAVID ROBARGE	he name and add	dress of any political committee to	solicit contributions from such committee.
MR DAVID ROBARGE			Medco Health PAC)
Mailing Address 4565 QUEENSLANE City MINNEAPOLIS	O LN N State MN	Zip Code 55446	Date of Receipt M M M
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n NICAL SVCS Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MS TRACEY RODGERS-LENGE Mailing Address 19 FARMINGTON C	Date of Receipt 0 7 0 5 2 0 0 8		
City	State	Zip Code	Transaction ID: INC.A.50535
RAMSEY FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	_ ,	NICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC Mailing Address 22 PAPOOSE TRAII			Date of Receipt
			07 05 2008
City ANDOVER	State NJ	Zip Code 07821	Transaction ID: INC.A.50882 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS		LIC AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)			75.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
A or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
_	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
	Mailing Address 96 LEHMANN STREE	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City	State	Zip Code	Transaction ID: INC.A.50639
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRESIDI	n ENT SYSTEMED	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	
	Full Name (Last, First, Middle Initial) DAVID ROOT	1		Date of Receipt
	Mailing Address 212 SPRING BRANCH	07 05 YYYYY 2008		
	City	State	Zip Code	Transaction ID: INC.A.50935
	WAVERLY	VA	23890	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR STA	n TE GOVERNMENT AFFAIR	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
	Mailing Address 7 RED OAK LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.50807
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CLINICAL TECH	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	, [
	Other (specify)		750.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		267.30

SCHEDULE A (FEC FO	rm 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 303 (check only one) X
NAME OF COMMITTEE (In Ful	eports and Statements may not be sold or used by any per an using the name and address of any political committee) DNS INC. POLITICAL ACTION COMMITTEE (a.k	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial DR CHRISTINE ROTTAS Mailing Address 7227 RAMO City JACKSONVILLE FEC ID number of contributing federal political committee.	tial)	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Ini MR RICHARD RUBINO Mailing Address 3 APACHE	<u> </u>	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50803
OAKLAND	NJ 07436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	193.00
Name of Employer MEDCO HEALTH SOLUTIONS	SVP FINANCE & CHIEF FIN OFFC	CR
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2895.00	
Full Name (Last, First, Middle Ini	iial)	Date of Receipt
Mailing Address 21 SKY TO	PRIDGE	07 05 2008
City	State Zip Code	Transaction ID: INC.A.50654
OAKLAND FEC ID number of contributing federal political committee.	NJ 07436	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLINICAL MGMT & SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page	(optional)	293.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO			Date of Receipt
	Mailing Address 66 FINCH RD			07 05 2008
	City	State	Zip Code	Transaction ID: INC.A.50751
	RINGWOOD FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period 20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVE	07 05 Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.50793
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAI	on RMACY REGULATORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1175.10	
_ C.	Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS			Date of Receipt
	Mailing Address 4836 MIDDLE RD			07 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.50822
	ALLISON PARK FEC ID number of contributing federal political committee.	C	15101	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	on SINESS REQUIREMENTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)	1		123.34
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 303 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	v not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RYAN SADLER			Date of Receipt
Mailing Address 85 VANCE ST. #201			07 05 2008
City	State	Zip Code	Transaction ID: INC.A.50939
MEMPHIS	TN	38103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR GO\	n VERNMENT AFFAIRS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		225.00	
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE			Date of Receipt
Mailing Address 7 AHERN WAY			07 05 7 2008
City	State	Zip Code	Transaction ID: INC.A.50683
WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n ENTERPRISE BUS INTELLI	 G
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY	1		Date of Receipt
Mailing Address 230 FAIRFIELD AVE.			07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.50588
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		375.00	
SUBTOTAL of Receipts This Page (optional)			75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summary	of the
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and address of any political o	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee. TEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS BETH SAVARE Mailing Address 27 JONES LN City BLAIRSTOWN	State Zip Code NJ 07825	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SR DIR PHARM OPS Aggregate Year-to-Date	25.00
Full Name (Last, First, Middle Initial) MS TRINA SAYLER Mailing Address 56 LAKESIDE DRIVE City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07446 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT Mailing Address 339 GRAMERCY PL City GLEN ROCK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07452 C Occupation SVP FINANCIAL & ANALY Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		90.00

SCHEDULE A (FEC Form 3X)

SKOKIE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Mailing Address Transaction ID: INC.A.50	IEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
MR ALLEN SCHWARTZ Mailing Address 9111 N KARLOV City State Zip Code IL 60076 FEC ID number of contributing federal political committee. Name of Employer MEDCO CHEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	commercial purposes, other than using the name ME OF COMMITTEE (In Full)	and address of any political committee to	solicit contributions from such committee.
Primary General Other (specify) ▼ 750.00 Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LANE - NORTH City State Zip Code MN 55311 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ 750.00 Full Name (Last, First, Middle Initial) City State Zip Code MN 55311 Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) City State Zip Code Middle Mid	A ALLEN SCHWARTZ illing Address 9111 N KARLOV Y KOKIE C ID number of contributing leral political committee. The property of the propert	cupation (EC DIR CLINICAL SVCS	M M / D D / Y Y Y Y
MR JEFFREY SCOTT Mailing Address 7330 EVEREST LANE - NORTH City State Zip Code MAPLE GROVE MN 55311 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ 750.00 Full Name (Last, First, Middle Initial) MR LEONARD SCOTT Mailing Address 13514 MOTTLESTONE DRIVE NW City State Zip Code PICKERINGTON OH 43147 FEC ID number of contributing federal political committee. Name of Employer Mailing Address 13514 MOTTLESTONE DRIVE NW City State Zip Code PICKERINGTON OH 43147 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Aggregate Year-to-Date ▼ Occupation REG DIR ACCT MGMT Receipt For: Primary General Aggregate Year-to-Date ▼	Primary General Other (specify) ▼	750.00	
MAPLE GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR LEONARD SCOTT Mailing Address 13514 MOTTLESTONE DRIVE NW City State Zip Code PICKERINGTON PICKERINGTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Occupation REG DIR ACCT MGMT Receipt For: Primary General Amount of Each Receipt this Amount of Each Receipt this	R JEFFREY SCOTT	RTH	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Tother (specify) Tother (specify) Total Mailing Address 13514 MOTTLESTONE DRIVE NW City State Zip Code PICKERINGTON OH 43147 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Occupation REG DIR ACCT MGMT Receipt For: Primary General Aggregate Year-to-Date Total Year-Total Year-Total Year-Year-Year-Year-Year-Year-Year-Year-	y S	tate Zip Code	Transaction ID: INC.A.50840
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) MR LEONARD SCOTT Mailing Address 13514 MOTTLESTONE DRIVE NW City State Zip Code PICKERINGTON OH 43147 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	C ID number of contributing		Amount of Each Receipt this Period 50.00
Receipt For: Primary General 750.00	me of Employer Oc EDCO HEALTH SOLUTIONS SF	·	
MR LEONARD SCOTT Mailing Address 13514 MOTTLESTONE DRIVE NW City State Zip Code PICKERINGTON OH 43147 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Date of Receipt M M M O 7 0 5 Transaction ID: INC.A.50 Amount of Each Receipt this	ceipt For: Ag Primary General	gregate Year-to-Date ▼	
City State Zip Code Transaction ID: INC.A.50 PICKERINGTON OH 43147 FEC ID number of contributing federal political committee. C Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Aggregate Year-to-Date ▼ Primary General Transaction ID: INC.A.50 Amount of Each Receipt this	R LEONARD SCOTT	VE NW	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General C Occupation REG DIR ACCT MGMT Aggregate Year-to-Date ▼	y	itate Zip Code	Transaction ID: INC.A.50731
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Occupation REG DIR ACCT MGMT Aggregate Year-to-Date 375.00	CKERINGTON C	OH 43147	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS REG DIR ACCT MGMT Aggregate Year-to-Date ▼ Primary General			25.00
Primary General		•	
	Primary General		
SUBTOTAL of Receipts This Page (optional)	ΓΟΤΑL of Receipts This Page (optional)	>	125.00

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106/303 (check only one)
Any or fo	rinformation copied from such Reports and Sor commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE			Date of Receipt
Ī	Mailing Address 3021 E MILLCREEK R	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City SALT LAKE CITY	State UT	Zip Code 84109	Transaction ID: INC.A.50526 Amount of Each Receipt this Period
Ī	FEC ID number of contributing federal political committee.	С		50.00
İ	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n R CLINICAL SVCS	
Ī	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ			Date of Receipt
Ī	Mailing Address 1220 CROSSING WAY	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City WAYNE	State NJ	Zip Code 07470	Transaction ID: INC.A.50556 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
i	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n FECHNOLOGY	
Ī	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV			Date of Receipt
-	Mailing Address 66 PROSPECT AVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City WESTWOOD	State NJ	Zip Code 07675	Transaction ID: INC.A.50860 Amount of Each Receipt this Period
-	FEC ID number of contributing rederal political committee.	C	07075	50.00
Ī	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BUSI	n NESS DEV	
Ī	Receipt For: Primary General Other (specify) ▼	r '	Year-to-Date ▼ 750.00	
su	BTOTAL of Receipts This Page (optional)		_	125.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Report or for commercial purposes, other than us	s and Statements may not be sold or used by any p sing the name and address of any political committe	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL ACTION COMMITTEE (a	.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III		Date of Receipt
Mailing Address 266 BRUSHY C	0 7 0 5 2 0 0 8	
City	State Zip Code	Transaction ID: INC.A.50716
LAS VEGAS	NV 89148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	1
Full Name (Last, First, Middle Initial) MR JOHN SHEA		Date of Receipt
Mailing Address 62 FRANKLIN T	07 05 YYYYY 2008	
City	State Zip Code	Transaction ID: INC.A.50540
ALLENDALE FEC ID number of contributing federal political committee.	NJ 07401	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MR FRANK SHEEHY	I	Date of Receipt
Mailing Address 119 HAMILTON	RD	0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50595
RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
	onal)	150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	4)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PETER SHERMAN			Date of Receipt
Mailing Address 139 GATES AVENU	07 05 2008		
City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INC.A.50519 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07042	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAGI	n NG COUNSEL	
Receipt For: Primary General Other (specify)	- ' '	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JAMES SHIVAS			Date of Receipt
Mailing Address 18 PROSPECT AVE	07 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City NORTH ARLINGTON	State NJ	Zip Code 07031	Transaction ID: INC.A.50678 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07031	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRICE		
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III			Date of Receipt
Mailing Address 150 CLAREMONT A	M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O		
City LONG BEACH	State CA	Zip Code 90803	Transaction ID: INC.A.50610
FEC ID number of contributing federal political committee.	C	30005	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 303 (check only one) X
0	ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	OLITIONE 7	TOTION CONNITTEE (a.s	
۱.	JEFFREY SIMEK Mailing Address 704 SAW PALMETTO	COURT		Date of Receipt 0 7 0 5 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.50695
	PORT ORANGE	FL	32128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR	n P COMMUNICATIONS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2884.65	
_	Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt
	Mailing Address 2390 GREENVIEW RC	DAD		07 05 2008
	City	State	Zip Code	Transaction ID: INC.A.50847
	NORTHBROOK	<u>IL</u>	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	_	AL MGR GROUP	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO			Date of Receipt
	Mailing Address 10 CHERRY TREE LA	NE		07 05 2008
	City	State	Zip Code	Transaction ID: INC.A.50726
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)			292.31

I7	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 303 (check only one) X
	ny information copied from such Reports and Star for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Poly	name and ad	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO Mailing Address 564 DALE COURT EAS City RIVER VALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupatio		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For: Primary General Other (specify) ▼		TECHNOLOGY e Year-to-Date ▼ 450.00]
В.	Full Name (Last, First, Middle Initial) MR JOHN SISTO Mailing Address 24 MAYBERRY LANE			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MECHANICSBURG FEC ID number of contributing federal political committee.	State PA	Zip Code 17050	Transaction ID: INC.A.50785 Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	-	PHARMACY REGULATORY e Year-to-Date ▼ 375.00	1
_ C.	Full Name (Last, First, Middle Initial) MR DAVID SITVER Mailing Address 24 YORKSHIRE AVE	0 0		Date of Receipt 0 7 0 5 7 2 0 0 8
	City SUFFERN FEC ID number of contributing federal political committee.	State NY	Zip Code 10901	Transaction ID: INC.A.50677 Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		TECHNOLOGY e Year-to-Date ▼ 375.00]
;	SUBTOTAL of Receipts This Page (optional))	80.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.:	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ANN SMITH Mailing Address 437 GLENDALE RD City WYCKOFF FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07481 C Occupation SR DIR PUBLIC AFFAIRS Aggregate Year-to-Date	Date of Receipt M M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) MR ROBERT SMITH Mailing Address 40 JOSHUA DR T City	State Zip Code	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50820
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	NJ 07446 C Occupation VP OPS	Amount of Each Receipt this Period 50.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 1500.00	
MR DAVID SNOW, JR Mailing Address 23 CEDAR GATE RO		Date of Receipt M M M
City DARIEN FEC ID number of contributing federal political committee.	State Zip Code CT 06820	Transaction ID: INC.A.50875 Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRMAN & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.65	
SUBTOTAL of Receipts This Page (optional) .		267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ALAN SOKALER Mailing Address 30 MICHELLE WAY City PINE BROOK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07058 C Occupation VP FINANCE Aggregate Year-to-Date 750.00	Date of Receipt M M D D Z D Z D S
Full Name (Last, First, Middle Initial) BARRY SOUTHERN Mailing Address 3705 MIDDLEBURY V City GREENSBORO FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code NC 27410 C Occupation GENERAL MGR Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE Mailing Address 6108 HUNTER LANE City COLLEYVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code TX 76034 C Occupation VP/GM Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor e name and address of any political committee to	n for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RALPH STAIANO		Date of Receipt
Mailing Address 1 LAMBROS DRIVE City	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50533
MONROE	NY 10950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) PETER STARK		Date of Receipt
Mailing Address 4840 COLE ROAD		07 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50973
MEMPHIS	TN 38117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP VP MANUF SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN		Date of Receipt
Mailing Address 7 FOREST LAKE DR		07 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50805
WEST HARRISON FEC ID number of contributing federal political committee.	NY 10604	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP VP FINANCE	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 750.00	
☐ Other (specify) ▼	100.00	
SUBTOTAL of Receipts This Page (optional) .	·····	125.00
TOTAL This Period (last page this line numbe	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 303 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any personal part and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHANNING STAVE Mailing Address 77 HIGHVIEW AVE City TUCKAHOE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NY 10707 C Occupation SR DIR MARKETING Aggregate Year-to-Date	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50934 Amount of Each Receipt this Period 25.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MS JILL STEARNS Mailing Address 13130 HALSELL DR	375.00	Date of Receipt 0 7 0 5 2 0 0 8
City AUSTIN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code TX 78732 C Occupation	Transaction ID: INC.A.50850 Amount of Each Receipt this Period 50.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	SR NATL ACCT EXEC Aggregate Year-to-Date ▼ 750.00]
MR CRAIG STEEL Mailing Address 122 DEMAREST AVE		Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
City EMERSON FEC ID number of contributing federal political committee.	State Zip Code NJ 07630	Transaction ID: INC.A.50630 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation NATL ACCT EXEC Aggregate Year-to-Date	
Primary General Other (specify) ▼	375.00	
SUBTOTAL of Receipts This Page (optional) .		100.00

	EDULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 303 (check only one)
Any info	rmation copied from such Reports and mmercial purposes, other than using th	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	E OF COMMITTEE (In Full) OCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Name (Last, First, Middle Initial) MY STEINKELLNER			Date of Receipt
Maili	ng Address 1740 HIGHLAND DR	07 05 2008		
City	I GROVE	State WI	Zip Code 53122	Transaction ID: INC.A.50670
FEC	ID number of contributing al political committee.	C	53122	Amount of Each Receipt this Period 50.00
Nam MED	e of Employer CO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
	Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 8 MILL GLEN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	PER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.50865 Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	C	07430	192.31
Nam MED	e of Employer CO HEALTH SOLUTIONS	Occupatio SVP/GM	n ADVANCED CLINICAL SLT	
Rece	ipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2884.65	
	Name (Last, First, Middle Initial) SERARD STOCKER, JR			Date of Receipt
	ng Address 80 ALGONQUIN TRL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	(LAND	State NJ	Zip Code	Transaction ID: INC.A.50631
FEC	ID number of contributing al political committee.	C	07436	Amount of Each Receipt this Period 15.00
Nam MED	e of Employer CO HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
QUIDTO	TAL of Receipts This Page (optional).	1		257.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MS JANNA STOUL	OLITIOAL /	TOTION COMMITTEE (a.n.a	Date of Receipt
	Mailing Address 4 APACHE WAY City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
В.	Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE DR	IVE		Date of Receipt
				07 05 2008
	City ORANGE	State CT	Zip Code 06477	Transaction ID: INC.A.50908 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00477	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO	n DUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
с. С.	Full Name (Last, First, Middle Initial) MS PATRICIA STRETE			Date of Receipt
	Mailing Address 19275 PAVER BARNE	S ROAD		07 05 2008
	City	State	Zip Code	Transaction ID: INC.A.50579
	MARYSVILLE FEC ID number of contributing federal political committee.	OH C	43040	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL THERAPEUTICS	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
-	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.			
Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN Mailing Address 38 BARKMILL TERR	RACE		Date of Receipt 0 7 0 5 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.50848
MONTVILLE	NJ	07045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS		ECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA SULLIVAN			Date of Receipt
Mailing Address 21 DENISE DRIVE	07 05 7 7 9 8		
City	State	Zip Code	Transaction ID: INC.A.50804
KINNELON FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period 192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINA	NCIAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt
Mailing Address 16025 PINE VALE P	L.		07 05 7 2008
City MIDLOTHIAN	State VA	Zip Code 23113	Transaction ID: INC.A.50537 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CS S	YSTEMS PLAN & IMPLEM	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)	1)	242.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt
Mailing Address 20 AVENUE @ PORT APPT 209	T IMPERIAL		07 05 2008
City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.50599 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07093	40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
Mailing Address 8362 GOLDEN PRAIR	RIE DRIVE		07 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.50638 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) MS JOANNE TAYLOR			Date of Receipt
Mailing Address 39 ROCKAWAY PLAG	CE		07 05 YYYY 02008
City PARSIPPANY	State NJ	Zip Code 07054	Transaction ID: INC.A.50539 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CONTRACT ADMINISTRAT	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional) .			105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 303 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ind Statements may not be sold or used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR Mailing Address 4241 CHADBOUR City	NE DRIVE State Zip Code	Date of Receipt M
UPPER ARLINGTON FEC ID number of contributing federal political committee.	OH 43220	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR CLINICAL SVCS Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial) MR BOOBALAN THANGAVELU Mailing Address 13 BIRCH TERRA	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: INC.A.50890
MT ARLINGTON FEC ID number of contributing federal political committee.	NJ 07856	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date ▼	
Other (specify) Full Name (Last, First, Middle Initial)	375.00	
MS MELINDA THIEL Mailing Address 27 GARVEY ROAI	D	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50609
WAYNE FEC ID number of contributing federal political committee.	NJ 07470	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00]
		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any person and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MELISSA THOMET Mailing Address 721 HINMAN AVE #1E City EVANSTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code IL 60202 C Occupation SR DIR ACCT MGMT OPS Aggregate Year-to-Date 375.00	Date of Receipt M M M O D D O 2008 Transaction ID: INC.A.50543 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MS MARY THORSBY Mailing Address 17326 ELLEN DR City LIVONIA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code MI 48152 C Occupation SR NATL ACCT EXEC Aggregate Year-to-Date 1125.00	Date of Receipt M M M O D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD Mailing Address 7974 FLAMETREE CT City LAS VEGAS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NV 89123 C Occupation VP/GM Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 303 (check only one) X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ay not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN Mailing Address 838 COLONIAL RD			Date of Receipt
	Walling Address 838 COLONIAL RD			07 05 7 2008
	City FRANKLIN LAKES	State NJ	Zip Code	Transaction ID: INC.A.50547
	FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BEN	on EFIT SYSTEMS SUPPORT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- 3.	Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER Mailing Address 710 INDIAN CREEK I	1		Date of Receipt
	Mailing Address 713 INDIAN CREEK I	ער		07 05 7 2008
	City	State	Zip Code	Transaction ID: INC.A.50723
	AMHERST FEC ID number of contributing federal political committee.	C	24521	Amount of Each Receipt this Period 75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	ON GOVERNMENT AFFAIRS	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1125.00	
- ;.	Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
	Mailing Address 16 FIELDHEDGE DR	IVE		07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HILLSBOROUGH	State NJ	Zip Code 08844	Transaction ID: INC.A.50854 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00044	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLI	on ENT SVC DELIVERY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
	SUBTOTAL of Receipts This Page (optional) .			155.00
-	SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line numbe		•	155.0

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR KEITH URICH			Date of Receipt
	Mailing Address 12495 SOUTH 1745 [EAST		07 05 7 2008
	City	State UT	Zip Code	Transaction ID: INC.A.50673
	DRAPER FEC ID number of contributing federal political committee.	C	84020	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	on IAL VP SALES-SYSTEMED	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
– В.	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE			Date of Receipt
	Mailing Address 31 LINCOLN RD			07 05 7 4 9 9
	City	State	Zip Code	Transaction ID: INC.A.50647
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR ANALYTICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00]
с. С.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
	Mailing Address W328 S4230 SPRING	RIDGE		07 05 2008
	City	State WI	Zip Code	Transaction ID: INC.A.50946
	WAUKESHA FEC ID number of contributing federal political committee.	C	53189	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	on GENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional) .			125.00
T	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to committee to committee (a.k.a.)	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK Mailing Address 56 ZIMMER AVENU City MIDLAND PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	·	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE R City ROCKVILLE CENTRE FEC ID number of contributing federal political committee.	State Zip Code NY 11570	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Occupation VP MKTING Aggregate Year-to-Date ▼ 750.00	
CHANTAL VEEVAETE Mailing Address 7292 OAKVILLE DE City GERMANTOWN FEC ID number of contributing federal political committee.	State Zip Code TN 38138	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	Occupation GROUP VP HR Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	125.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 303 (check only one) X 11a
or for o	formation copied from such Reports and Scommercial purposes, other than using the ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>М</u> Б Ма	II Name (Last, First, Middle Initial) R WIL VELARDE illing Address 443 WEST SADDLE F		Zip Code	Date of Receipt 0 7 0 5 2 0 0 8
Cit;	PPER SADDLE RIVER	State NJ	07458	Transaction ID: INC.A.50597 Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	C	07450	40.00
	me of Employer EDCO HEALTH SOLUTIONS ceipt For:	, '	n TECHNOLOGY e Year-to-Date ▼	
	Primary General Other (specify) ▼	93 - 94	600.00	
MF	ll Name (Last, First, Middle Initial) R JEFFREY VERNICE illing Address 201 WATCHUNG AVI	ENUE		Date of Receipt
	UNIT #17	01-1-	7'- 0-4-	07 05 2008
Cit	y .OOMFIELD	State NJ	Zip Code 07003	Transaction ID: INC.A.50593 Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	C	07003	25.00
	me of Employer EDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MEDICAL	
Re	ceipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 375.00	
MF	Il Name (Last, First, Middle Initial) R GORDON VICKERS illing Address 436 MOUNTAIN AVEI	NUE		Date of Receipt 0 7 0 5 2 0 0 8
Cit	у	State	Zip Code	Transaction ID: INC.A.50516
<u>W</u>	ESTFIELD	NJ	07090	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		25.00
	me of Employer EDCO HEALTH SOLUTIONS	, '	CCT EXEC	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
CUE	FOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MUNISH VIJ Mailing Address 11 BOULDER TRAIL City MAHWAH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07430 C Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date 375.00	Date of Receipt M M J D D J Z D O 8 Transaction ID: INC.A.50892 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MS ANNETTE WAGNER Mailing Address 8 INDIAN RUN ROAD City LONG VALLEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07853 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7
Full Name (Last, First, Middle Initial) MR MICHAEL WAIBEL Mailing Address N48 W16381 LONE O City MENOMONEE FALLS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	AK LN State Zip Code WI 53051 C Occupation SR DIR ACCT MGMT OPS Aggregate Year-to-Date 225.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7
SUBTOTAL of Receipts This Page (optional)		65.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedu for each category of the Detailed Summary Pa	ne (crieck only one)
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by a g the name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee. E (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN Mailing Address 450 BEECHMON	DR	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW ROCHELLE FEC ID number of contributing	State Zip Code NY 10804	Transaction ID: INC.A.50777 Amount of Each Receipt this Period 192.31
Receipt For: Primary Other (specify) ▼	Occupation SVP REGULATORY & MC PF Aggregate Year-to-Date 2884	ROGRAMS
Full Name (Last, First, Middle Initial) MS THERESE WALKER Mailing Address 363 MULBERRY (СТ	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50532
WYCKOFF FEC ID number of contributing federal political committee.	NJ 07481	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375	.00
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE		Date of Receipt
Mailing Address 5445 GOODWIN	AVENUE	07 05 2008
City DALLAS	State Zip Code TX 75206	Transaction ID: INC.A.50894
FEC ID number of contributing federal political committee.	TX 75206	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT LEADE	ER .
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884	.65
CURTOTAL of Descripts This Description	nal)	409.62

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes NAME OF COMMITTE	s, other than using the name and E (In Full)	may not be sold or used by any pers d address of any political committee to AL ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee. a. Medco Health PAC)
Full Name (Last, First, I MR CALVIN WASDYKE	Middle Initial)		Date of Receipt
City	State	e Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50728
MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
FEC ID number of cont federal political committee			50.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occup		
Receipt For: Primary Other (specify)		egate Year-to-Date ▼	
Full Name (Last, First, I MS CATHERINE WASSO Mailing Address 391			Date of Receipt
	Z CALLE ANDALOGIA		07 05 2008
City	State	·	Transaction ID: INC.A.50550
SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
FEC ID number of cont federal political committ	ee. C		50.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occup	pation ATL ACCTS	
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 750.00	
Full Name (Last, First, I MS BEVERLY WATSON			Date of Receipt
Mailing Address 2 M	CHELANGELO COURT		07 05 7 2008
City	State	'	Transaction ID: INC.A.50771
SOMERSET FEC ID number of cont		08873	Amount of Each Receipt this Period 25.00
federal political committ Name of Employer MEDCO HEALTH SOL	Occup		
Receipt For:	J DIR E	BENEFIT DELIVERY SYSTEMS egate Year-to-Date ▼	<u> </u>
Primary Other (specify)	General	375.00	
SUBTOTAL of Receipts	This Bass (autional)		125.00

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) MRS KELLY WEBBER Mailing Address 107 UPPER SADDLE City MONTVALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	e name and address	s of any political committee to TION COMMITTEE (a.k.a. Zip Code 07645	o solicit contributions from such committee.
MRS KELLY WEBBER Mailing Address 107 UPPER SADDLE City MONTVALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupation VP CORP H	07645	Transaction ID: INC.A.50707 Amount of Each Receipt this Period
MONTVALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP H	07645	Transaction ID: INC.A.50707 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP H	В	
	VP CORP H	R	7
Receint For:	Aggregate Yea		
Primary General Other (specify) ▼	0 0 0	ar-to-Date ▼ 1500.00]
Full Name (Last, First, Middle Initial) MARK WEGRYN Mailing Address 1717 DYMOKE DRIV	E		Date of Receipt 0 7 0 5 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.50680
COLLIERVILLE	TN	38017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	- - - - - - - - - - 	D PRODUCT INTEGRAT	ΓΙΦΝ
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 375.00]
Full Name (Last, First, Middle Initial) LOWELL WEINER	l		Date of Receipt
Mailing Address 1 BURGESS COURT			07 05 7 2008
City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.50932 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP C	OMMUNICATIONS	7
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional) .	1		175.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pene name and address of any political committee	
	POLITICAL ACTION COMMITTEE (a.k	x.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH Mailing Address 309 WATERVIEW D	R	Date of Receipt
City	State Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50619
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES, CEO ACCREDO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.65	
Full Name (Last, First, Middle Initial) MR KENNETH WERMES		Date of Receipt
Mailing Address 26037 N WRANGLE		07 05 7 2008
City	State Zip Code	Transaction ID: INC.A.50700
SCOTTSDALE	AZ 85255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1125.00	
Full Name (Last, First, Middle Initial) MR PETER WHITE		Date of Receipt
Mailing Address 2241 E. PINCHOT A #17F		07 / 05 / Y Y Y Y Y
City PHOENIX	State Zip Code AZ 85016	Transaction ID: INC.A.50538
FEC ID number of contributing federal political committee.	C 83016	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT OPS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
		292.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS COLETTE WILSON Mailing Address 16608 56TH PL W City LYNNWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	+ +	Zip Code 98037 ACCT EXEC Year-to-Date ▼	Date of Receipt M M M O D D O 2 0 0 8 Transaction ID: INC.A.50626 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER Mailing Address 17 LYNWOOD RD City VERONA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07044 n DRG DEV Year-to-Date ▼	Date of Receipt M M M O D D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial) MR MICHAEL WISNIEWSKI Mailing Address 23 DRUID HILL DR City PARSIPPANY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	- ·	Zip Code 07054 1 CONTRACT ADMINISTRAT Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persong the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW F City TOWACO FEC ID number of contributing federal political committee.	`	Date of Receipt 0 7 0 5 2 0 0 8 Transaction ID: INC.A.50633 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP MEDICARE FINANCE Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACI	<u> </u>	Date of Receipt 0 7 0 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.50548
PISCATAWAY	NJ 08854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR RRA	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) MS ANNA WONG		Date of Receipt
Mailing Address 64-20 BELL BLVD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.50889
BAYSIDE FEC ID number of contributing federal political committee.	NY 11364	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INSURED SOLUTIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	al)	130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	
Full Name (Last, First, Middle Initial) MS JUDITH WOOD Mailing Address 76 COLONIAL ROAD City STILLWATER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 12170 C Occupation SR DIR ACCT MGMT OPS Aggregate Year-to-Date 375.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) BRENDA WRIGHT Mailing Address 1834 HUNTERS CRE City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code TN 38138 C Occupation VP QUALITY INTEGRITY HEALTH Aggregate Year-to-Date 750.00	Date of Receipt M M M D D D Z 2008 Transaction ID: INC.A.50960 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY Mailing Address 793 LINCOLN AVE City POMPTON LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07442 C Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date 375.00	Date of Receipt O 7 O 5 2 0 0 8 Transaction ID: INC.A.50591 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		100.00

	OULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 303 (check only one) X
or for com	nation copied from such Reports and Si imercial purposes, other than using the OF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Na	ame (Last, First, Middle Initial)	OLITIOAL 7	TOTION CONTINUE (a.r. a	
	RAH YINGLING J Address 901 ST MARKS AVE			Date of Receipt 0 7 0 5 2 0 0 8
City WES	TFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.50689 Amount of Each Receipt this Period
FEC II	O number of contributing political committee.	C	07090	25.00
Name MEDC	of Employer O HEALTH SOLUTIONS	Occupatio SR DIR I	n PRODUCT MGMT	
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
MR DA	ame (Last, First, Middle Initial) NIEL ZELEM, JR J Address 219 SPOOK ROCK RE).		Date of Receipt
City		State	Zip Code	0 7 0 5 2 0 0 8 Transaction ID: INC.A.50760
<u>SUFF</u>	ERN	NY	10901	Amount of Each Receipt this Period
	O number of contributing political committee.	C		50.00
Name MEDC	of Employer O HEALTH SOLUTIONS	Occupatio VP E-CC		
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	ame (Last, First, Middle Initial) L ZELMAN			Date of Receipt
Mailing	Address 43604 EMERALD DUN	IES PL		07 05 2008
City	PRUDO	State	Zip Code	Transaction ID: INC.A.50815
FEC II	BURG O number of contributing political committee.	C	20176	Amount of Each Receipt this Period 25.00
Name MEDC	of Employer O HEALTH SOLUTIONS	Occupatio SR DIR (n CONSOLIDATION PLAN	
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
SUBTO	AL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3A)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Report or for commercial purposes, other than us	s and Statements may sing the name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) ANDREA ZICCARELLI			Date of Receipt
Mailing Address 6550 HERONW	OOD DR		0 7 0 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.50608 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30113	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS D	DEV AND MARKETING	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI	L		Date of Receipt
Mailing Address 6691 DEERVIEV	V DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.50667 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70170	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	- + ·	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO			Date of Receipt
Mailing Address 726 HIGH MOU	NTAIN ROAD		0 7 0 5 2 0 0 8
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.50899
FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (opti			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	he name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO Mailing Address 26 DAYLILY DRIVE			Date of Receipt M
City MOUNT LAUREL FEC ID number of contributing	State NJ	Zip Code 08054	Transaction ID: INC.A.51447 Amount of Each Receipt this Period 15.00
Receipt For: Primary Other (specify) General	Occupation DIR HR	Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 3380 SADDLEBROO	OK STREET		Date of Receipt 0 7 1 2 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.51047
LAS VEGAS FEC ID number of contributing federal political committee.	C	89141	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	_ ' '	RM PRACTICE	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS GWEN BRADY			Date of Receipt
Mailing Address 219 E. COMO AVEN	IUE		07 12 2008
City COLUMBUS	State OH	Zip Code 43202	Transaction ID: INC.A.51128
FEC ID number of contributing federal political committee.	C	43202	Amount of Each Receipt this Period 12.50
Name of Employer MEDCO HEALTH SOLUTIONS	'	INESS PLANNING	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIST. City VERADALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code WA 99037 C Occupation VP OPS Aggregate Year-to-Date 300.00	Date of Receipt M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 2903 CHUKKAR COL City PLANT CITY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code FL 33567 C Occupation VP/GM Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) MR WILLIS DINGLE Mailing Address 905 SW SCRUB OAK City PALM CITY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code FL 34990 C Occupation VP HR Aggregate Year-to-Date 675.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		60.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13//303 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
Mailing Address 9 GREEN HILL TR	AIL		M M / D D / Y Y Y Y Y Y Y Y 12 2008
City	State TX	Zip Code	Transaction ID: INC.A.51275
TROPHY CLUB FEC ID number of contributing federal political committee.	C	76262	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATI	n ONAL SERVICE CENTER	7
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS	 		Date of Receipt
Mailing Address 544 DENMOOR CO	DURT		0 7 1 2 2 0 0 8
City GALLOWAY	State OH	Zip Code	Transaction ID: INC.A.51087
FEC ID number of contributing federal political committee.	C	43119	Amount of Each Receipt this Period 12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n IRM PRACTICE	7
Receipt For: Primary General Other (specify) ▼	- ' '	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12224 MONTCALM	1 STREET		07 12 2008
City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.51332 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	7
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 725.00	
SUBTOTAL of Receipts This Page (optional	al)		87.50

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROVE City GIBSONIA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State PA C Occupation VP/GM	Zip Code 15044	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN Mailing Address 2001 MEADOWS AV	/ENUE		Date of Receipt 0 7
City	State	Zip Code	Transaction ID: INC.A.51254
LANTANA FEC ID number of contributing federal political committee.	C	76226	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt
Oit.	Otata	7:n Code	07 12 2008
City <u>KELLER</u>	State TX	Zip Code 76248	Transaction ID: INC.A.51411 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	7
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)			80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 139 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDGO HEALTH SOLUTIONS INC.	ne name and address of a	any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address 8475 DUNHAM STA City TAMPA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		ACTICE	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREE	0 0 0	750.00	Date of Receipt 0 7 1 2 2 0 0 8
City		Code	Transaction ID: INC.A.51237
LAS VEGAS FEC ID number of contributing federal political committee.	NV 891	40	Amount of Each Receipt this Period 60.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP OPS Aggregate Year-to-I	Date ▼ 1560.00	_
Full Name (Last, First, Middle Initial)	l		Data of Descript
MS JENNIFER SPIDLE Mailing Address 6108 HUNTER LANE	<u> </u>		Date of Receipt M M
City COLLEYVILLE	•	Code	Transaction ID: INC.A.51265
FEC ID number of contributing federal political committee.	TX 760	34	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-l	750.00	
SUBTOTAL of Receipts This Page (optional)	1		110.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRAII	DIE DDIVE		Date of Receipt
	Walling Address 8302 GOLDEN PRAIL	NIE DRIVE		07 12 2008
	City	State	Zip Code	Transaction ID: INC.A.51160
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1500.00	
— В.	Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD	<u> </u>		Date of Receipt
	Mailing Address 7974 FLAMETREE C	T		07 12 7 2008
	City	State	Zip Code	Transaction ID: INC.A.51230
	LAS VEGAS	NV	89123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
 C.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD	RD		07 12 2008
	City MOORESTOWN	State NJ	Zip Code 08057	Transaction ID: INC.A.51249
	FEC ID number of contributing federal political committee.	C	00037	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1500.00	
Γ,	SUBTOTAL of Receipts This Page (optional).	1		125.00
\vdash	FOTAL This Period (last page this line numbe			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 303 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	e name and add	dress of any political committee to	o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI		torrow commirrial (and	Date of Receipt
	Mailing Address 6691 DEERVIEW DRI	VE		07 12 2008
	City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.51189 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43140	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
_	Full Name (Last, First, Middle Initial) WILLIAM LAGOS Mailing Address 11401 IVY HOMES PL	ACE		Date of Receipt
		07 15 2008		
	City RICHMOND	State VA	Zip Code 23233	Transaction ID: INC.A.50037
	FEC ID number of contributing federal political committee.	C	23233	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation V.P., KE	n Y ACCOUNTS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1500.00]
	Full Name (Last, First, Middle Initial) MS LESLIE ACHTER Mailing Address 821 ALBEMARLE STR	REET		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51138
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	, ·	R ANALYTICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
ſ,	SUBTOTAL of Receipts This Page (optional)			1550.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK Mailing Address 1021 SUNSET RIDGE	-		Date of Receipt
				07 19 2008
	City BRIDGEWATER	State NJ	Zip Code 08807	Transaction ID: INC.A.51067
	FEC ID number of contributing federal political committee.	C	00007	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHA	on RM CONTRACT & CONSUL	TING
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Б.	Full Name (Last, First, Middle Initial) DIANE ADAMS	1		Date of Receipt
	Mailing Address 34 THOMAS ST.			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51443
	CALDWELL	NJ	07006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENT	S
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 375.00	
- C.	Full Name (Last, First, Middle Initial) MR STEPHEN ADLER			Date of Receipt
	Mailing Address 139 BELLVALE LAKE	S RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WARWICK	State NY	Zip Code 10990	Transaction ID: INC.A.51137
	FEC ID number of contributing federal political committee.	C	10990	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	on O TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number	· onlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY ALEXANDER Mailing Address 4 DEERPOND CT City FLEMINGTON FEC ID number of contributing	State NJ	Zip Code 08822	Date of Receipt M M M
Receipt For: Primary Other (specify) ▼	Occupatio SR DIR I	n E-COM STRAT & DELI • Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL DF City MIDLOTHIAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State VA C Occupatio VP CLIN	Zip Code 23113 n ICAL SVCS e Year-to-Date ▼ 750.00	Date of Receipt O 7 19 2008 Transaction ID: INC.A.51136 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MARENE ALLISON Mailing Address 4405 WISMER ROAD City DOYLESTOWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 18901 n JRITY & ASSET PROTECTI e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	I)	115.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 303 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and addr	ess of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO Mailing Address 19 ROSS ROAD City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SCARSDALE FEC ID number of contributing federal political committee.	NY C	10583	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		TECHNOLOGY Year-to-Date ▼ 750.00]
Full Name (Last, First, Middle Initial) TEJWANSH ANAND Mailing Address 10 WHIPPOORWIL	LL LAKE ROAD		Date of Receipt 0 7 1 9 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.51407
CHAPPAQUA FEC ID number of contributing federal political committee.	C	10514	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) DR ROGER ANDERSON			Date of Receipt
Mailing Address 833 OXFORD COU	IRT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LEWISVILLE	State TX	Zip Code 75056	Transaction ID: INC.A.51433
FEC ID number of contributing federal political committee.	C	73030	Amount of Each Receipt this Period 192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CH	IIEF PHARMACIST	
Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 2884.50	
SUBTOTAL of Receipts This Page (optional			292.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 303 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS Mailing Address 48 WITTE ROAD	Chata	7:n Code	Date of Receipt 0 7 1 9 2 0 0 8
City HEWITT FEC ID number of contributing federal political committee.	State NJ	Zip Code 07421	Transaction ID: INC.A.51268 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR EXE Aggregate		
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI Mailing Address 20 CHADWELL PL	ACE		Date of Receipt 0 7 1 9 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.51214
MORRISTOWN FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO	DUNSEL	
Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt
Mailing Address 5788 S. WALDEN	GLEN DRIVE		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51491
MURRAY FEC ID number of contributing federal political committee.	C	84123	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional	al)	.	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persole name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK Mailing Address 2636 SHAKER RD City CLEVELAND HEIGHTS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code OH 44118 C Occupation NATL ACCT EXEC Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) ERIK BAGIN Mailing Address 73 HIGHLAND AVEN City GLEN RIDGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07028 C Occupation GROUP VP FINANCE Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO Mailing Address 80 N. WOODLAND S City ENGLEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	STREET State Zip Code NJ 07631 C Occupation VP PROPOSAL UNIT Aggregate Year-to-Date 525.00	Date of Receipt M M / D D / Y Y Y Y Y O 7 19 2008 Transaction ID: INC.A.51350 Amount of Each Receipt this Period 35.00
SUBTOTAL of Receipts This Page (optional)	>	110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA Mailing Address 69 SKYLINE DR City UPPER SADDLE RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07458 C Occupation VP INFO TECHNOLOGY Aggregate Year-to-Date ▼	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MICHAEL BARONE Mailing Address 452 MEDWAY RD City HIGHLAND HEIGHTS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code OH 44143 C Occupation SVP & GENERAL MGR	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51469 Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR STEPHEN BARROW Mailing Address 7 SOUTHVIEW ROAD City RANDOLPH FEC ID number of contributing federal political committee.	Aggregate Year-to-Date 3750.00 State Zip Code NJ 07869	Date of Receipt M M M / D D / Y Y Y Y Y 0 7 1 9 2 0 0 8 Transaction ID: INC.A.51351 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR FINANCE Aggregate Year-to-Date 335.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		325.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sold. C. POLITICAL ACTION COMMITTEE (a.k.a.	colicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DAVID BAUGH Mailing Address 1813 ADONIS AVE City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NV 89074 C Occupation MGR BENEFIT DELIVERY SYSTEMS Aggregate Year-to-Date 615.00	Date of Receipt M M D D 2 0 0 8
Full Name (Last, First, Middle Initial) MR PETER BEGANS Mailing Address 1605 CHARNITA C City VIENNA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Other (specify)	State Zip Code VA 22182 C Occupation VP GOVERNMENT AFFAIRS Aggregate Year-to-Date 1500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEPHEN BELL Mailing Address 24 GLENWOOD R City UPPER SADDLE RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	OAD State Zip Code NJ 07458 C Occupation VP FINANCE Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	200.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 303 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Po	name and ad	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) JEAN BERGWALL Mailing Address 2546 HOLLYHOCK CO City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General	State TN C Occupation DIR PRO	Zip Code 38138 on DDUCT LINE II e Year-to-Date ▼ 375.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) MS STACEY BERNSTEIN Mailing Address 166 BERKELEY PLACE City GLEN ROCK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation ASST CO	Zip Code 07452	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ C.	Full Name (Last, First, Middle Initial) MR DAVID BERRY Mailing Address 11 COBBLESTONE LA City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation DIR TEC	Zip Code 07446 on CHNOLOGY e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
H	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		<u> </u>	70.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 303 (check only one) X
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to . POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS EILEEN BIDELL Mailing Address 71 WASHINGTON C City TOWACO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Date of Receipt M M M J D D J 2008 Transaction ID: INC.A.51274 Amount of Each Receipt this Period 25.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS Mailing Address 4273 BROGDAN FA	RM COURT	Date of Receipt 0 7 1 9 2 0 0 8
City BUFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code GA 30518 C Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date 375.00	Transaction ID: INC.A.51289 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) CALVIN BINGHAM Mailing Address 13702 W. 48TH ST. City SHAWNEE FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General	State Zip Code KS 66216 C Occupation DIR CLINICAL OPS Aggregate Year-to-Date	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51492 Amount of Each Receipt this Period 25.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	375.00	75.00

WESTPORT CT 06 FEC ID number of contributing federal political committee. Name of Employer MEDICAL THE SOLUTIONS Occupation	Date of Receipt Date of Receipt Transaction ID: INC.A.51406 Amount of Each Receipt this Period S, EMPLOYER GROUP
A. BRYAN BIRCH Mailing Address 4 WINDRUSH LANE City State Zi WESTPORT CT 06 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO	ip Code 6880 Transaction ID: INC.A.51406 Amount of Each Receipt this Period 192.00 S, EMPLOYER GROUP
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO	
MS CHRISTINE BIZARRO	2880.00
City State Zi _l	Date of Receipt M M D D Y Y Y Y Y Y Y Y
MOUNT LAUREL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIP LIP	Amount of Each Receipt this Period 15.00
MEDCO HEALTH SOLUTIONS DIR HR Receipt For: Primary General Other (specify) ▼ DIR HR	to-Date ▼ 450.00
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LANE	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ip Code Transaction ID: INC.A.51397 5331 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00
Name of Employer Occupation MEDCO HEALTH SOLUTIONS SVP CLIENT &	& MKT STRATEGIC DEV
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to	
SUBTOTAL of Receipts This Page (optional)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 303 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MARK BLAKE			Date of Receipt
	Mailing Address 129 NORWOOD AVE	NUE		07 19 7 2008
	City MONTCLAIR	State NJ	Zip Code	Transaction ID: INC.A.51454
	FEC ID number of contributing federal political committee.	C	07043	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	on INESS DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- В.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN Mailing Address 50 NEW ENGLAND D	ıR		Date of Receipt
			7:n Code	07 19 2008
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.51234 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT	on ING & PRODUCT DEV	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 750.00	
С. С.	Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
	Mailing Address P.O. BOX 381947			07 19 2008
	City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.51317
	FEC ID number of contributing federal political committee.	C	30103	Amount of Each Receipt this Period 192.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation SVP FIN		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2880.00	
	SUBTOTAL of Receipts This Page (optional)			292.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 303 (check only one) X 11a
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to . POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA Mailing Address 80 LEONA CT City LEVITTOWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 11756 C Occupation DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51400 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MRS HEATHER BONOME Mailing Address 305 10TH STREET I City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code DC 20002 C Occupation DIR CLINICAL SVCS Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA Mailing Address 109 ARBOR PL City BRYN MAWR FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code PA 19010 C Occupation VP SALES Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))	75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 303 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perg the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 3380 SADDLEBRO City LAS VEGAS	C. POLITICAL ACTION COMMITTEE (a.k. DOK STREET State Zip Code NV 89141	Date of Receipt 0 7 19 2 0 0 8 Transaction ID: INC.A.51048 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	DIR PHARM PRACTICE Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) RUSS BOURNE Mailing Address 242 N HIGHLAND		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State Zip Code TN 38111	Transaction ID: INC.A.51505 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN Mailing Address 5259 FISHERCRE	ST LN	Date of Receipt 0 7 1 9 2 0 0 8
City RICHMOND	State Zip Code VA 23231	Transaction ID: INC.A.51356
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORMULARY CONSULTING	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	
	•	275.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 303 (check only one) X
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) KAREN BOWE Mailing Address 177 N. MILL ROAD City	State	Zip Code	Date of Receipt M M
	HARRISBURG FEC ID number of contributing federal political committee.	C	17112	Amount of Each Receipt this Period 25.00
	Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	+ +	MMUNITY AFFAIRS Year-to-Date ▼ 375.00	
- 3.	Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE			Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51394
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	_ '	R STRAT PRODUCT MGM Year-to-Date ▼ 450.00	<u>r </u>
. –	Full Name (Last, First, Middle Initial) MS GWEN BRADY			Date of Receipt
	Mailing Address 219 E. COMO AVENU	JE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.51129
	COLUMBUS FEC ID number of contributing federal political committee.	OH C	43202	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n INESS PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional).	1		67.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL F	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM			Date of Receipt
Mailing Address 210 FROG HOLLO	OW ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COATESVILLE	State PA	Zip Code 19320	Transaction ID: INC.A.51344 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n & PROCESS ENGINEERIN	 IG
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1125.00	
Full Name (Last, First, Middle Initial) MR DAVID BREEN			Date of Receipt
Mailing Address 27 SEALS DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONROE	State NY	Zip Code 10950	Transaction ID: INC.A.51320 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANA	n LLYTICAL SVCS	
Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt
Mailing Address 136 BEECH ST			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BELLEVILLE	State NJ	Zip Code 07109	Transaction ID: INC.A.51178
FEC ID number of contributing federal political committee.	C	07109	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT/MEMBER COMM	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option	al)		125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157/303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
Mailing Address 469 MANOR LANE			07 19 2008
City PELHAM MANOR	State NY	Zip Code 10803	Transaction ID: INC.A.51171 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DDUCT DEVELOPMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER			Date of Receipt
Mailing Address 9 ROMARY COURT	Γ		07 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GLEN ROCK	State NJ	Zip Code 07452	Transaction ID: INC.A.51084 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07432	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE	
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt
Mailing Address 540 GIORDANO DR	RIVE		07 19 2008
City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC.A.51106 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTE	n ERPRISE BUS INTELLIGEN	— C €
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional) 		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to	solicit contributions from such committee.
	. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. STEVEN BROWN		Date of Receipt
Mailing Address 140 S GROVE PARI		07 19 2008
City <u>MEMPHIS</u>	State Zip Code TN 38117	Transaction ID: INC.A.51494 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRODUCT LINE II	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS VIVIAN BULGER Mailing Address 120 EAST MAIN ST		Date of Receipt
		07 19 2008
City WASHINGTONVILLE	State Zip Code NY 10992	Transaction ID: INC.A.51316 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. AMANDA BUNDY	_	Date of Receipt
Mailing Address 5812 SEVEN POINT	TS TRACE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.51485
HERMITAGE FEC ID number of contributing federal political committee.	TN 37076	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIMBURSEMENT	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional))	95.00
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC Form SITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Reports or for commercial purposes, other than us	and Statements may no	ot be sold or used by any persons of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL AC	TION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) BRIAN BURFORD			Date of Receipt
Mailing Address 603 CHARLESW	OOD DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MARION	State AR	Zip Code	Transaction ID: INC.A.51484
FEC ID number of contributing federal political committee.	C	72364	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR BUS D		
Receipt For: Primary General Other (specify) ▼		ear-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt
Mailing Address 25 TIMBERLAND			0 7 1 9 2 0 0 8
City ALISO VIEJO	State CA	Zip Code 92656	Transaction ID: INC.A.51218
FEC ID number of contributing federal political committee.	C	32030	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL	MGR GROUP	
Receipt For: Primary General Other (specify) ▼	- ' '	ear-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MRS PEGEEN BUTTERFIELD			Date of Receipt
Mailing Address 23 NUTTING PLA	ACE.		07 19 2008
City WEST CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.51146
FEC ID number of contributing federal political committee.	C	07000	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUS	SINESS DEVELOPMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option	nal)		100.00
TOTAL This Period (last page this line no	ımber only))	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 303 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER Mailing Address 441 S ELM STREET City MAYWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Zip Code 07607 n SINESS REQUIREMENTS	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI Mailing Address 119 WASHINGTON A	AVENUE	600.00	Date of Receipt
City	State	Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51298
CHATHAM FEC ID number of contributing federal political committee.	NJ C	07928	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n ONTROLLER e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI			Data of Danaint
Mailing Address 24 SHERI DRIVE			Date of Receipt 0 7 1 9 2 0 0 8
City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.51310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.401	52.50
Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP	n VP MARKET STRATEGY &	DEV
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 787.50	
SUBTOTAL of Receipts This Page (optional) .			142.50

SCHEDULE A (FEC I	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 303 (check only one) X
or for commercial purposes, othe	r than using the name and a -ull)	ay not be sold or used by any pers ddress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee. a. Medco Health PAC)
Full Name (Last, First, Middle JOSEPH CASACCIA JR Mailing Address 9788 LIP City GERMANTOWN FEC ID number of contributin federal political committee. Name of Employer ACCREDO HEALTH GROU Receipt For: Primary General Other (specify)	SEY CV State TN G C Occupati DIR SP Aggrega	Zip Code 38139 ion ECIALTY OPS CUST SVC te Year-to-Date ▼ 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle MS MARY CASALE Mailing Address 822 CED City HADDENFIELD FEC ID number of contributin federal political committee. Name of Employer MEDCO HEALTH SOLUTIO Receipt For: Primary General Other (specify)	State NJ G Occupati VP SAL Aggrega	Zip Code 08033 ion .ES STRATEGY & MARKETI tte Year-to-Date ▼ 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle MS KAREN CATHCART RUSS Mailing Address 148 CLU City WEST COLUMBIA FEC ID number of contributin federal political committee. Name of Employer MEDCO HEALTH SOLUTIO Receipt For: Primary General Other (specify)	State SC G Occupati SR DIR Aggrega	Zip Code 29172 ion CLINICAL SVCS tte Year-to-Date ▼ 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This P	age (optional)		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 162 / 303 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P			
Full Name (Last, First, Middle Initial)	OLITICAL ACTI	ON COMMITTEE (a.k.a	i. Medco Health PAC)
MR JASON COLE Mailing Address 14917 E BELLA VISTA	<u> </u>		Date of Receipt
			07 19 2008
City		Zip Code	Transaction ID: INC.A.51208
VERADALE FEC ID number of contributing federal political committee.	C	99037	Amount of Each Receipt this Period 10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 300.00]
Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE			Date of Receipt
Mailing Address 130 WEST 67TH STRE	EET, #4J		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51421
NEW YORK	NY	10023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECH	HNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt
Mailing Address 270 S FRANKLIN TUR	NPIKE		07 19 2008
City	State 2	Zip Code	Transaction ID: INC.A.51099
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLTH CA	ARE OPS-TECHNOLOG	GY .
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional))	60.00

TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) JEFFREY COOLE			Date of Receipt
Mailing Address 1280 RIVER HOLL	OW COVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CORDOVA	State TN	Zip Code 38016	Transaction ID: INC.A.51483 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX	n AND REGULATORY REPOR	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) ANTONIO CORREIA	<u> </u>		Date of Receipt
Mailing Address 19 WILLIAMS LAN	IE		07 19 2008
City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID: INC.A.51456 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10014	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BLIST	n NESS DEV	
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN			Date of Receipt
Mailing Address 25 FAIRWAY TRA	IL		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.51198 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07071	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	NARMACY NETWORK MGMT	-
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option:			150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (check only one)
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by a githe name and address of any political common. C. POLITICAL ACTION COMMITTEE	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee. E (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR HART COVEN Mailing Address 28 OAK LANE City MORRISTOWN	State Zip Code NJ 07960	Date of Receipt M M M
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP INFO TECHNOLOGY Aggregate Year-to-Date 750	.00
Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA CA	TALINA DR	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.51182
SCOTTSDALE FEC ID number of contributing	AZ 85255	Amount of Each Receipt this Period 60.00
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	
Receipt For: Primary Other (specify)	EXEC DIR PRODUCT Aggregate Year-to-Date ▼ 900	.00
Full Name (Last, First, Middle Initial) MR PETER CSUTOROS		Date of Receipt
Mailing Address 16 PLEASANT AV	ENUE	07 19 7 2008
City LINCOLN PARK	State Zip Code NJ 07035	Transaction ID: INC.A.51414 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
SUBTOTAL of Receipts This Page (option	al)	135.00

SCHEDULE ITEMIZED R	A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBEI (check only one) X 11a 11b 13 14	R: PAGE 165/303
or for commercial	pied from such Reports and ourposes, other than using the MMITTEE (In Full)	Statements mand add	y not be sold or used by any persodress of any political committee to	on for the purpose of so	liciting contributions
		POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PA	C)
MR ANGELO C	t, First, Middle Initial) JOZZO S 19 IDA COURT				9 2008
City <u>STATEN ISL</u>	AND	State NY	Zip Code 10312	Transaction ID: Amount of Each	INC.A.51228 Receipt this Period
FEC ID numbe federal political		C			25.00
Name of Emplo MEDCO HEAL	yer TH SOLUTIONS	Occupatio DIR TEC	n :HNOLOGY		
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	Year-to-Date ▼ 375.00]	
Full Name (Las MR JOHN DALY Mailing Address				Date of Receipt	D / Y 'Y 'Y 'Y
	40 DLUEBELL GT		7: 0 1	07 1	9 2008
City PARAMUS		State NJ	Zip Code 07652	Transaction ID: Amount of Each	INC.A.51328 Receipt this Period
FEC ID numbe federal political		C			25.00
Name of Emplo MEDCO HEAL	yer TH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY		
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	Year-to-Date ▼ 375.00]	
Full Name (Las	t, First, Middle Initial) ANIEL			Date of Receipt	
Mailing Addres	17 DEVONSHIRE DE	RIVE			9 2008
City RANDOLPH		State NJ	Zip Code 07869	Transaction ID:	INC.A.51294 Receipt this Period
FEC ID numbe federal political		C	07000	Amount of Each	25.00
Name of Emplo MEDCO HEAL	yer TH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY		
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	e Year-to-Date ▼ 375.00]	
SUBTOTAL of R	eceipts This Page (optional)				75.00
	od (last page this line numbe		<u> </u>		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 303 (check only one) X 11a
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COU			07 19 2008
	City PLANT CITY	State FL	Zip Code 33567	Transaction ID: INC.A.51270 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	7
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 750.00	
 3.	Full Name (Last, First, Middle Initial) MR ANDREW DAVIS			Date of Receipt
	Mailing Address 5616 BROOK DRIVE			07
	City	State	Zip Code	Transaction ID: INC.A.51180
	EDINA	MN	55439	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MED	on NCARE CLIENT & SALES SU	JP
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
_	Full Name (Last, First, Middle Initial) WARREN DAVIS			Date of Receipt
-	Mailing Address 3131 SADDLEGAIT C	OVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.51504
	GERMANTOWN FEC ID number of contributing federal political committee.	C	38138	Amount of Each Receipt this Period 25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation		
	Receipt For:	DIR FIN	ANCE II e Year-to-Date ▼	
	Primary General Other (specify) ▼	33.134.	375.00]
Г		1		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167/303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DANIEL DAVISON			Date of Receipt
Mailing Address 402 HIGHLAND AV	E		07 19 2008
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.51311
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	n ANCIAL PLANNING	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS			Date of Receipt
Mailing Address W62 N1032 FAIRHA	AVEN CT		07 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CEDARBURG	State WI	Zip Code 53012	Transaction ID: INC.A.51244
FEC ID number of contributing federal political committee.	C	33012	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO			Date of Receipt
Mailing Address 80 HILLSIDE AVEN	UE		M M / D D / Y Y Y Y Y O N N N N N N N N N N N N N N
City GLEN RIDGE	State NJ	Zip Code 07028	Transaction ID: INC.A.51216 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07020	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 303 (check only one) X
A 0	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS TONI DEMANSS			Date of Receipt
	Mailing Address 32 RED BARN LANE			07 19 7 2008
	City	State	Zip Code	Transaction ID: INC.A.51429
	WEST MILFORD FEC ID number of contributing federal political committee.	NJ C	07480	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 375.00	
_	Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO			Date of Receipt
	Mailing Address 1 RUGBY ROAD			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51100
	CEDAR GROVE	NJ	07009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	375.00	
_	Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY			Date of Receipt
	Mailing Address 17 RICHWOOD PLAC	CE		07 19 YYYY 2008
	City	State	Zip Code	Transaction ID: INC.A.51444
	DENVILLE FEC ID number of contributing federal political committee.	NJ C	07834	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR MEI	n DICARE COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Γ	SUBTOTAL of Receipts This Page (optional) .			75.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 303 (check only one) X
0	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) DONNA DENARDO Mailing Address W2996 GIBRALTER I	BOAD.		Date of Receipt
				07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51462
	FISH CREEK	WI	54212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR MEDICARE	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2884.50	
. –	Full Name (Last, First, Middle Initial) MR JOHN DERRICO			Date of Receipt
	Mailing Address 195 HACKENSACK A	07 19 2008		
	City	State	Zip Code	Transaction ID: INC.A.51403
	HARRINGTON PARK	NJ	07640	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	- I -	MARKETING	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	0 0	375.00	
	Full Name (Last, First, Middle Initial) MS LAURA DEVEAU	'		Date of Receipt
	Mailing Address 2289 BEDFORD ST A	APT D2		07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51235
	STAMFORD	CT	06905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP MA	n RKETING	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		375.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		242.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any peen name and address of any political committee	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS KAREN DEZEARN Mailing Address 3625 PATTERSTONE City ALPHARETTA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code GA 30022 C Occupation SR NATL ACCT EXEC Aggregate Year-to-Date 375.00	Date of Receipt M M D D 2 0 0 8 Transaction ID: INC.A.51074 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR WILLIS DINGLE Mailing Address 905 SW SCRUB OAK City PALM CITY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D 2 2008 Transaction ID: INC.A.51145 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) ANDREW DOEDYNS Mailing Address 117 CREST DRIVE City BEAVER FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code PA 15009 C Occupation DIR CLINICAL OPS Aggregate Year-to-Date 375.00	Date of Receipt M M M D D D 2008 Transaction ID: INC.A.51473 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)	,	75.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) MR ROBERT DOLAN Mailing Address 9 CRANE AVENUE			Date of Receipt 0 7 1 9 2 0 0 8
	City WEST CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.51295 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		25.00
	Receipt For: Primary General Other (specify) ▼		CHNOLOGY e Year-to-Date ▼ 375.00	
_ 3.	Full Name (Last, First, Middle Initial) MS MERIDITH DORNER Mailing Address 4448 CREEK ROAD			Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51090
	ALLENTOWN FEC ID number of contributing federal political committee.	C	18104	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
 :.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE Mailing Address 58 INDEPENDENCE V	VAY		Date of Receipt 0 7 1 9 2 0 0 8
	City MORRIS TWP	State NJ	Zip Code	Transaction ID: INC.A.51413
	FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENTE	n ERPRISE BUS INTELLIGEN	— C €
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1538.40	
	SUBTOTAL of Receipts This Page (optional)			242.30
	TOTAL This Period (last page this line number		·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 303 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 125 COMSTOCK TRA	\1I		Date of Receipt
		NIL		07 19 2008
	City	State CT	Zip Code	Transaction ID: INC.A.51227
	EAST HAMPTON FEC ID number of contributing federal political committee.	C	06424	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
— В.	Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY Mailing Address 2 DECKER TERRACE	- I		Date of Receipt
	Maining Address 2 DEOREN TENNAGE	07 19 2008		
	City	State	Zip Code	Transaction ID: INC.A.51112
	KINNELON FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00]
— D.	Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY			Date of Receipt
	Mailing Address 14026 KNOX STREE	Γ		07 19 2008
	City OVERLAND PARK	State KS	Zip Code 66221	Transaction ID: INC.A.51141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	on ES SEGMENT LEADER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
s	SUBTOTAL of Receipts This Page (optional) .			100.00
	OTAL This Period (last page this line number	· only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 303 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARK DUNN Mailing Address 2 OLD MILL ROAD City SANDY HOOK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code CT 06482 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	SR DIR TECHNOLOGY Aggregate Year-to-Date ▼ 375.00]
Full Name (Last, First, Middle Initial) DR SUMIT DUTTA Mailing Address 534 HUDSON STRE #3C City NEW YORK FEC ID number of contributing federal political committee.	State Zip Code NY 10014	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP & GENERAL MGR Aggregate Year-to-Date 1155.00	
Full Name (Last, First, Middle Initial) REBECCA DYER Mailing Address 1400 POPLAR EST	ATES PKY	Date of Receipt 0 7 1 9 2 0 0 8
City GERMANTOWN FEC ID number of contributing federal political committee.	State Zip Code TN 38138	Transaction ID: INC.A.51493 Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	Occupation DIR PROJECT MGMT Aggregate Year-to-Date 375.00	
SUBTOTAL of Receipts This Page (optional	l)	127.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS))	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 303 (check only one)
Any information copied from such Reports or for commercial purposes, other than using	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
Mailing Address 109 KAREN PLAC	CE		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51105
WYCKOFF FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD			Date of Receipt
Mailing Address 128 SUMMIT AVE	07 19 2008		
City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC.A.51432
FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICA	n RE CHIEF MEDICAL OFFIC	EER
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON			Date of Receipt
Mailing Address 106 GRAHAM TE	RRACE		07 19 2008
City SADDLE BROOK	State NJ	Zip Code	Transaction ID: INC.A.51285
FEC ID number of contributing federal political committee.	C	07663	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optio	nal)		125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175 / 303 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN Mailing Address 359 LONG HILL ROAI	D EAST		Date of Receipt
	City BRIARCLIFF MANOR	State NY	Zip Code 10510	Transaction ID: INC.A.51435 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR	n P COMMUNICATIONS	50.00
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 750.00	
- З.	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN Mailing Address 75 TWEED BLVD			Date of Receipt 0 7 1 9 2 0 0 8
	City UPPER GRANDVIEW	State NY	Zip Code 10960	Transaction ID: INC.A.51037 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	P MEDICAL&ANLYTC AFF	२८
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.65]
-).	Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT Mailing Address 11540 39TH AVE N			Date of Receipt 0 7 1 9 2 0 0 8
	City PLYMOUTH	State MN	Zip Code 55441	Transaction ID: INC.A.51186 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR ACCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
	SUBTOTAL of Receipts This Page (optional)	•		257.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 303 (check only one) X 11a
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS Mailing Address 100 WINSTON DRIV 17 C NORTH City	VE State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CLIFFSIDE PARK	NJ 07010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATE	R DR.	Date of Receipt 0 7 1 9 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.51123
<u>LITHIA</u>	FL 33547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) RICHARD FARIS		Date of Receipt
Mailing Address 2020 HEATHER CO	VE	07 19 2008
City	State Zip Code	Transaction ID: INC.A.51502
<u>MEMPHIS</u>	TN 38119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP HEALTH OUTCOME SOLUTION:	S
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
	· · · · · · · · · · · · · · · · · · ·	90.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 303 (check only one) X
\	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSWOOD	COVE		Date of Receipt
	City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.51480 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼		n NT SLS AND MGD CARE e Year-to-Date ▼ 450.00	
 3.	Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR	l		Date of Receipt 0 7 1 9 2 0 0 8
	City MAHWAH	State NJ	Zip Code	Transaction ID: INC.A.51172
	FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	E ENHANCING SOLUTIONS	3
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00]
	Full Name (Last, First, Middle Initial) MR THOMAS FEITEL Mailing Address 58 APPLE HILL DR			Date of Receipt 0 7 1 9 2 0 0 8
	City GILLETTE	State NJ	Zip Code 07933	Transaction ID: INC.A.51219
	FEC ID number of contributing federal political committee.	C	07933	Amount of Each Receipt this Period 192.23
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP CO	n RP MKTG & E-COMM	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2691.22	
	SUBTOTAL of Receipts This Page (optional)			292.23

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR STUART FELDMAN			Date of Receipt
	Mailing Address 109 MEADOWBROOK	ROAD		07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51035
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR E-COMM STRAT & DELI\	/
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		375.00	
— В.	Full Name (Last, First, Middle Initial) MS DAWN FELDNER			Date of Receipt
	Mailing Address 275 BIRCH STREET	07 19 / Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.51357
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS REQUIREMENTS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		375.00	
— С.	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO			Date of Receipt
	Mailing Address 464 SPRING AVE.			07 19 2008
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INC.A.51312
	FEC ID number of contributing		07450	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		375.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
\vdash	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pe the name and address of any political committee C. POLITICAL ACTION COMMITTEE (a.k	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) RONALD FIELMANN Mailing Address 2061 ARLEEN CT	·	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCHAUMBURG	State Zip Code IL 60194	Transaction ID: INC.A.51481 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	Occupation AVP SALES Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) MR DON FISCHER Mailing Address 10 TRACY CIRCLE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.51113
CAMPBELL HALL FEC ID number of contributing federal political committee.	NY 10916	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER Mailing Address 465 OLD STONE R	D	Date of Receipt 0 7 1 9 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.51165
RIDGEWOOD FEC ID number of contributing federal political committee.	NJ 07450	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	NO.
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS Mailing Address 1933 MT. OLIVE AGOSTA ROAD City NEW BLOOMINGTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 43341 on HLTH CARE OPS e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
— В.	Full Name (Last, First, Middle Initial) CHAD FOREMAN Mailing Address 9544 DOGWOOD EST City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State TN C Occupatio DIR FINA		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
С.	Full Name (Last, First, Middle Initial) KEVIN FRANCO Mailing Address 648 RIVERSIDE DR #222 City MEMPHIS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State TN C Occupatio VP FINA Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		<u> </u>	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 303 (check only one) X 11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAI City TROPHY CLUB FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code TX 76262 C Occupation VP NATIONAL SERVICE CENTER Aggregate Year-to-Date 1500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGANSE City CRANSTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) ROBERT FURTH Mailing Address 1450 PORTLAND AV City ST PAUL FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	/ENUE State Zip Code MN 55104 C Occupation GENERAL MGR Aggregate Year-to-Date ▼ 375.00	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51490 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI Mailing Address 24 MOREHOUSE PL City NEW PROVIDENCE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07974 C Occupation VP & COUNSEL	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI Mailing Address 720 N. LARRABEE APT 1701 City CHICAGO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code IL 60654 C Occupation SVP & GENERAL MGR Aggregate Year-to-Date 2884.65	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER Mailing Address 842 ASHLER CT City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code OH 43235 C Occupation NATL ACCT EXEC Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Statements may not be sold or used by any person and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO Mailing Address 69 LAKEVIEW DR City OLD TAPPAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07675 C Occupation VP CLIENT RELATIONS Aggregate Year-to-Date 750.00	Date of Receipt M M J D D J Z 2008 Transaction ID: INC.A.51251 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MICHAEL GALVIN Mailing Address 25 BALLYMEADE RO City HOPEWELL JUNCTION FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 12533 C Occupation SVP/CHIEF INFRASTRUCTURE OFF Aggregate Year-to-Date 2884.65	Date of Receipt M M J J D J J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYER Mailing Address 9 CAIRNES ROAD City MORRIS PLAINS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07950 C Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date 375.00	Date of Receipt M M J D D J 2008 Transaction ID: INC.A.51424 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)	>	267.31

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 303 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PETER GAYLORD Mailing Address 1201 BRIDGE ST	REET	Date of Receipt 0 7 1 9 2 0 0 8
City ASBURY PARK FEC ID number of contributing federal political committee.	State Zip Code NJ 07712	Transaction ID: INC.A.51033 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP TREASURY & FINANCIAL EVA Aggregate Year-to-Date ▼ 750.00	LS
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE	E DR	Date of Receipt 0 7 1 9 2 0 0 8
City ROBBINSVILLE FEC ID number of contributing federal political committee.	State Zip Code NJ 08691	Transaction ID: INC.A.51143 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation GENERAL MGR GROUP Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MATTHEW GIBBS Mailing Address 27 N. WACKER D	DR.	Date of Receipt 0 7 1 9 2 0 0 8
SUITE 246 City CHICAGO FEC ID number of contributing federal political committee.	State Zip Code IL 60606	Transaction ID: INC.A.51464 Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF CLINICAL OFFICER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	
SUBTOTAL of Receipts This Page (option	nal)	175.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS Mailing Address 544 DENMOOR CO City GALLOWAY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code OH 43119 C Occupation DIR PHARM PRACTICE Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) MR THOMAS GILSON	375.00	Date of Receipt
Mailing Address 2 PELL FARM ROAL City SADDLE RIVER FEC ID number of contributing federal political committee.	State Zip Code NJ 07458	Transaction ID: INC.A.51388 Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP & GENERAL MGR Aggregate Year-to-Date 2884.65	
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD Mailing Address 305 BERGAMOT DF	RIVE	Date of Receipt 0 7 1 9 2 0 0 8
City MEDINA FEC ID number of contributing federal political committee.	State Zip Code MN 55340	Transaction ID: INC.A.51038 Amount of Each Receipt this Period 192.30
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation PRES UHG Aggregate Year-to-Date 2884.50	
SUBTOTAL of Receipts This Page (optional)		397.11

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PA (check only one) X 11a 11b 11c 13 14 15	GE 186 / 303
or for comme	on copied from such Reports and rcial purposes, other than using the COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting or	ontributions
MEDCO	HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
MR JONA	e (Last, First, Middle Initial) H GITLITZ Idress 43 OVERLOOK RIDG	GE		Date of Receipt M M M / D D / Y 0 7 1 9	2008
City OAKLAN	ND	State NJ	Zip Code 07436	Transaction ID: INC.A.	
	umber of contributing litical committee.	C			50.00
Name of E MEDCO H	Employer HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC		
Receipt Fo		Aggregate	e Year-to-Date ▼ 750.00		
MS AUDR	(Last, First, Middle Initial) EY GOODMAN Idress 26 HILLSIDE AVE.			Date of Receipt	
	idless 26 HILLSIDE AVE.			07 19	2008
City <u>GLEN R</u>	OCK	State NJ	Zip Code 07452	Transaction ID: INC.A.	
FEC ID nu	umber of contributing litical committee.	C	07.102	Amount of Each recorpt	15.00
Name of E MEDCO H	Employer HEALTH SOLUTIONS	Occupatio VP ORG			
Receipt For Prim Other		Aggregate	e Year-to-Date ▼ 225.00		
	e (Last, First, Middle Initial) S GORMAN			Date of Receipt	
Mailing Ad	ddress 11 WASHBURN RD			M M / D D / Y	2008
City <u>CANTO</u>	NI	State CT	Zip Code 06022	Transaction ID: INC.A.	
FEC ID nu	umber of contributing litical committee.	C	00022	Amount of Each Receipt	25.00
Name of E MEDCO H	Employer HEALTH SOLUTIONS	Occupatio SR DIR	n CLIENT & MKT PROG STRA	- т	
Receipt Fo		Aggregate	e Year-to-Date ▼ 375.00		
SUBTOTAL	of Receipts This Page (optional) .	1)		90.00
TOTAL This	s Period (last page this line numbe	r only)	>		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR Mailing Address 1928 BEVERLY LAN City BUFFALO GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code IL 60089 C Occupation VP FINANCIAL INSIGHTS	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 750.00	
MR EDWARD GRIX Mailing Address 525 ORANGEBURG City PEARL RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	State Zip Code NY 10965 C Occupation SR DIR E-COM BUSINESS OPS Aggregate Year-to-Date 375.00	Date of Receipt M M / D D / Y Y Y Y Y 2 0 0 8 Transaction ID: INC.A.51175 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VANE City CONVENT STATION FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07960 C Occupation REGIONAL VP SALES-SYSTEMED Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD Mailing Address 264 HARVEST AVE City STATEN ISLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NY C Occupatio VP CON	Zip Code 10310	Date of Receipt M M
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR Mailing Address 50 BELLEVUE AVE City SUMMIT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio GROUP Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y O 7 1 9 2 0 0 8 Transaction ID: INC.A.51054 Amount of Each Receipt this Period 90.00
Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI Mailing Address 67 ATHERTON CT City WAYNE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	- 	Zip Code 07470 n SHNOLOGY e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line numbe			130.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 303 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK HALLORAN			Date of Receipt
Mailing Address 19 KINGS RIDGE I			07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51286
LONG VALLEY	NJ	07853	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF IN	FO OFFICER	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		2884.65	
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt
Mailing Address 1659 ISABELLA PA	ARKWAY		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51392
<u>CHASKA</u>	MN	55318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT	SVCS & ADMIN	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS KELLY HANZAWA			Date of Receipt
Mailing Address 1116 OAKCROFT	LANE		07
City	State	Zip Code	Transaction ID: INC.A.51359
SOMERSET	NJ	08873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	Г MGMT OPS	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	375.00	
			267.31

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 303 (check only one) X
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW			Date of Receipt
Mailing Address 8 PROSPECT PLACE			07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51083
POMPTON PLAINS	NJ	07444	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n FINANCE	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) SHARON HARRIS			Date of Receipt
Mailing Address 186 N. WHITE STATIO	N RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51482
MEMPHIS	TN	38117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR HR	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt
Mailing Address 19520 YELLOW WING	COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51036
COLORADO SPRINGS	CO	80908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP GOV	n ERNMENT AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.65	
SUBTOTAL of Receipts This Page (optional)		·····	242.31

TOTAL This Period (last page this line number only)

A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not b		13 14 15 16 17
	NAME OF COMMITTEE (In Full)	name and address	pe sold or used by any perso of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION	ON COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) DAN HAYES Mailing Address 4679 AYRON TERRAC)		Date of Receipt
	Walling Address 4079 AT HON TENNAC	JE		07 19 2008
	City		Zip Code	Transaction ID: INC.A.51476
	PALM HARBOR	<u>FL</u> 3	34685	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS		
	Receipt For: Primary General	Aggregate Year-		
	Other (specify) ▼	0 0 0	750.00	
 3.	Full Name (Last, First, Middle Initial) MR BILL HEAD	•		Date of Receipt
	Mailing Address 501 SLATERS LANE #816			07 19 7 2008
	City		Zip Code	Transaction ID: INC.A.51445
	ALEXANDRIA	VA 2	22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GOV AFF	FAIRS	
	Receipt For:	Aggregate Year-	-to-Date ▼	
	Primary General Other (specify) ▼		375.00	
 ;.	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD			Date of Receipt
	Mailing Address 13210 N. 11TH AVE.			0 7 1 9 2 0 0 8
	City		Zip Code	Transaction ID: INC.A.51110
	PHOENIX	AZ 8	85029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES		
	Receipt For:	Aggregate Year-	-to-Date ▼	
	Primary ☐ General Other (specify) ▼		375.00	
ſ,	SUBTOTAL of Receipts This Page (optional)	I		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	he name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS HEKKER Mailing Address 28 WEST THRID ST City SOUTH ORANGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ C Occupation SR DIR	Zip Code 07079 n TECHNOLOGY e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR SCOTT HELMUS Mailing Address 23 VALLEY RD City SUCCASUNNA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07876	Date of Receipt M M M / D D / Y Y Y Y Y O 7 1 9 2 0 0 8 Transaction ID: INC.A.51093 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR ERIC HESS Mailing Address 10 CARLTON RD City FLANDERS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	<u> </u>	Zip Code 07836 n INEERING & OPS e Year-to-Date ▼	Date of Receipt M M M D D D 2008 Transaction ID: INC.A.51167 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)		······	120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 303 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT Mailing Address 35 CASCADE WAY City BUTLER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07405 C Occupation DIR E-COM STRAT & DELIV Aggregate Year-to-Date 375.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) SHERLYN HOBGOOD Mailing Address 6635 LAMBERT DR City MASON FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code TN 38049 C Occupation VP BUSINESS UNIT Aggregate Year-to-Date 450.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON Mailing Address 1 HERITAGE RD City FLORHAM PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07932 C Occupation REGIONAL VP PHARMACIES Aggregate Year-to-Date 750.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a)	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN Mailing Address 974 HILLCREST RC City RIDGEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07450 C Occupation VP FACILITIES Aggregate Year-to-Date	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51331 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN Mailing Address 9 HIRLE ST City CORNWALL ON HUDSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NY 12520 C Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date 375.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL City LAGUNA NIGUEL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code CA 92677 C Occupation VP SALES Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	·····	125.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 303 (check only one) X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	o solicit contributions from such committee.
/	MEDCO HEALTH SOLUTIONS INC. P Full Name (Last, First, Middle Initial)	OLITICAL /	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
۹.	ELIZABETH HOLLOWAY Mailing Address 9222 RANDLE VALLE	Y DR		Date of Receipt 0 7 1 9 2 0 0 8
	City CORDOVA	State TN	Zip Code 38018	Transaction ID: INC.A.51500 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio ASSISTA	n ANT GENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
3.	Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE			Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51283
	ELMSFORD FEC ID number of contributing federal political committee.	C	10523	Amount of Each Receipt this Period 80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INTE	n RVENTION DELIVERY SYS	— GT
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1200.00	
_ :.	Full Name (Last, First, Middle Initial) MS CYNTHIA HORN			Date of Receipt
	Mailing Address 9553 ANDREW DR			07 19 2008
	City TWINSBURG	State OH	Zip Code 44087	Transaction ID: INC.A.51471 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CUS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)			155.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	х)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ Mailing Address 30 AVENUE AT Portage APT. 415 City WEST NEW YORK	ORT IMPERIAL State NJ	Zip Code 07093	Date of Receipt M M M
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	 	NESS PLANNING Year-to-Date 750.00	
Full Name (Last, First, Middle Initial) LYNN HOSTMYER Mailing Address 6708 N.W. 112TH	•		Date of Receipt 0 7 1 9 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.51488
OKLAHOMA CITY	OK	73162	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer ACCREDO HEALTH GROUP		L MGR - MULTI BRANCH	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR JEFFREY HULL	•		Date of Receipt
Mailing Address 2616 S 3B'S & K F	RD		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51263
GALENA FEC ID number of contributing federal political committee.	OH C	43021	Amount of Each Receipt this Period 30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H	n HLTH CARE OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (option	nal)		105.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANE HULSE Mailing Address 95 GORDON RD City ESSEX FELLS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07021 C Occupation VP FINANCE Aggregate Year-to-Date 750.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DAVID ISRAEL Mailing Address 730 COLUMBUS A' City NEW YORK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS SUSAN ITO Mailing Address 6366 SW 90TH STE City GAINESVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	150.00

SCHEDULE A (FE ITEMIZED RECEIF	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198 / 303 (check only one) X
or for commercial purposes, NAME OF COMMITTEE	other than using the name and (In Full)	may not be sold or used by any personal address of any political committee to a ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mi MS MARIANNE JACKS			Date of Receipt
Mailing Address 329 N	ORRIS AVENUE		07 19 2008
City	State NJ	·	Transaction ID: INC.A.51076
MOUNTAIN LAKES FEC ID number of contrib federal political committee	outing	07046	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLU	Occupa SR NA	ation ATL ACCT EXEC	
Receipt For: Primary Other (specify) ▼	Aggreç	gate Year-to-Date ▼ 750.00	
Full Name (Last, First, Mi	,		Date of Receipt
Mailing Address 56 W	ARREN RD		07 19 2008
City	State	'	Transaction ID: INC.A.51369
WEST ORANGE FEC ID number of contrib federal political committee		07052	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLU	Occupa EXEC	ation DIR MEDICARE OPS	
Receipt For: Primary Other (specify) ▼	Aggreç	gate Year-to-Date ▼ 750.00	
Full Name (Last, First, Mi	ddle Initial)		Date of Receipt
Mailing Address RR 2	BOX 2036		07 19 2008
City	State	·	Transaction ID: INC.A.51044
CANADENSIS FEC ID number of contribution federal political committee		18325	Amount of Each Receipt this Period 30.00
Name of Employer MEDCO HEALTH SOLU	Occupa DIR P	ation HYSICIAN ENGAGEMENT	
Receipt For: Primary Other (specify) ▼		gate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts Th	is Page (optional)		130.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 303 (check only one) X
or for commercial purposes, other than u	ts and Statements may not be sold or used by any pers signing the name and address of any political committee to SINC. POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TODD JEFFREY Mailing Address 15 ELIZABETH City DUMONT	STREET State Zip Code NJ 07628	Date of Receipt 0 7 1 9 2 0 0 8 Transaction ID: INC.A.51381 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C Occupation	50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	VP PHARM CONTRACT & CONSUL Aggregate Year-to-Date ▼ 750.00	TING
Full Name (Last, First, Middle Initial) ROBERT JINKS Mailing Address 22 PAGE AVE		Date of Receipt 0 7 1 9 2 0 0 8
City LYNDHURST FEC ID number of contributing	State Zip Code NJ 07071	Transaction ID: INC.A.51085 Amount of Each Receipt this Period 50.00
name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR WILLIAM JOEL Mailing Address 32 VENTOSA [DR	Date of Receipt 0 7 1 9 2 0 0 8
City MORRISTOWN	State Zip Code NJ 07960	Transaction ID: INC.A.51213 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANALYTICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (op	tional)	125.00
TOTAL This Period (last page this line	number only)	

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 303 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may g the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALN	A STREET		Date of Receipt
City	State	Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51334
CARMEL	IN	46032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 725.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES	'		Date of Receipt
Mailing Address 12224 MONTCALN			07 19 2008
City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.51337 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 725.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12224 MONTCALN	/ STREET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.51335 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 725.00	
SUBTOTAL of Receipts This Page (optional	al)		75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	ress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALI	M OTDEET		Date of Receipt
City	State	Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51336
CARMEL FEC ID number of contributing federal political committee.	C	46032	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	_	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 725.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALI	M STREET		Date of Receipt
City	State	Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51333
CARMEL	IN	46032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 725.00	
Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD	<u>'</u>		Date of Receipt
Mailing Address 16357 VICTORIA	CURVE SE		07 19 YYYY 2008
City PRIOR LAKE	State MN	Zip Code 55372	Transaction ID: INC.A.51209 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	NT & MKT PROG STRAT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (option	ial)		85.00

City TAMPA FL 33847 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Cull Name (Last, First, Middle Initial) Ms BECKY KAUS Malling Address N81 W18359 TOURS DR City State Zip Code MENOMONEE FALLS WI 53951 FEC ID number of contributing federal political committee. Cull Name (Last, First, Middle Initial) Ms BECKY KAUS Malling Address N81 W18359 TOURS DR City State Zip Code MENOMONEE FALLS WI 53951 FEC ID number of contributing federal political committee. Cull Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Cull Name (Last, First, Middle Initial) Ms WILLIAM KEELER Malling Address 63 MOUNTAIN GLEN ROAD City State Zip Code Transaction ID: INC.A.51399 Amount of Each Receipt Inc.A. 51399 Transaction ID: INC.A.51399 Amount of Each Receipt Inc.A. 51399 Amount of Each Receipt Inc.A. 51399 Transaction ID: INC.A.51399 Amount of Each Receipt Inc.A. 51399 Amount of Each Receipt Inc.A. 51399 Transaction ID: INC.A.51399 Amount of Each Receipt Inc.A. 51399 Transaction ID: INC.A.51399 T		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI Mailing Address 8202 MARSH GLEN CT City State Zip Code TAMPA FL 33647 FEC ID number of contributing federal political committee. Name of Employer MEDOO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Name of Employer MEDOO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Cuty State Zip Code MENOMONEE FALLS WI 53051 FEC ID number of contributing federal political committee. Name of Employer MEDOO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Date of Receipt MENOMONEE FALLS WI 53051 Amount of Each Receipt this Period Transaction ID: INC A.51195 Amount of Each Receipt this Period Transaction ID: INC A.51195 Amount of Each Receipt this Period Transaction ID: INC A.51195 Amount of Each Receipt this Period Date of Receipt Transaction ID: INC A.51399 Transaction ID: INC A.51399 Amount of Each Receipt this Period Date of Receipt Transaction ID: INC A.51399 Transaction ID: INC A.51399 Amount of Each Receipt this Period Date of Receipt Transaction ID: INC A.51399 Amount of Each Receipt this Period Date of Receipt Transaction ID: INC A.51399 Transaction ID: INC A.51399 Amount of Each Receipt this Period Date of Receipt Transaction ID: INC A.51399 Transaction ID: INC A.51399 Amount of Each Receipt Inis Period Transaction ID: INC A.51399	7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
City TAMPA FL 33947 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ State Zip Code MENOMONEE FALLS Name of Employer MENOMONEE FALLS Name o	∠ . .	Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI			Date of Receipt
Solution Second		City	State		0 7 1 9 2 0 0 8 Transaction ID: INC.A.51309
Receipt For: Primary		federal political committee.			50.00
Address N81 W18359 TOURS DR City State Zip Code Transaction ID: INC.A.51195 MENOMONEE FALLS WI 53051 FEC ID number of contributing federal political committee. Name of Employer MENCH MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN ROAD City State Zip Code Transaction ID: INC.A.51195 Amount of Each Receipt this Period 25.00 Date of Receipt Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN ROAD City State Zip Code Transaction ID: INC.A.51399 RINGWOOD NJ 07456 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Coccupation TECHNICAL SPECIALIST Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 375.00		Receipt For: Primary General	SR DIR	PHARMACY COMPLIANCE e Year-to-Date ▼ 750.00	
Transaction ID: INC.A.51195 MENOMONEE FALLS WI 53051 Amount of Each Receipt this Period EC 25.00 Name of Employer Mellulan Keeler Railing Address 63 MOUNTAIN GLEN ROAD City State Zip Code Mailing Address 63 MOUNTAIN GLEN ROAD FEC ID number of contributing General Other (specify) ▼ Name of Employer Mellulan Keeler Railing Address 63 MOUNTAIN GLEN ROAD City State Zip Code RINGWOOD FEC ID number of contributing General Other (specify) ▼ Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 375.00 Transaction ID: INC.A.51195 Amount of Each Receipt this Period Transaction ID: INC.A.51399 Amount of Each Receipt this Period 25.00	3.	MS BECKY KAUS	DR		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS		•		Zip Code	
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN ROAD City State Zip Code RINGWOOD NJ 07456 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Occupation TECHNICAL SVCS Aggregate Year-to-Date ▼ Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date ▼ 375.00		FEC ID number of contributing		53051	Amount of Each Receipt this Period 25.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN ROAD City State Zip Code RINGWOOD NJ 07456 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00		Name of Employer MEDCO HEALTH SOLUTIONS			
MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN ROAD City State Zip Code RINGWOOD NJ 07456 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M M O 7 1 9 2 0 0 8 Transaction ID: INC.A.51399 Amount of Each Receipt this Period 25.00		Primary General	Aggregate	1 1 1 1 1 1 1	
City RINGWOOD NJ 07456 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify) ▼ State Zip Code NJ 07456 Amount of Each Receipt this Period C 25.00 C 375.00		MR WILLIAM KEELER	ROAD		M M / D D / Y Y Y Y
RINGWOOD NJ 07456 Amount of Each Receipt this Period C 25.00 Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 25.00 25.00		City	State	Zip Code	
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date ▼ 375.00		RINGWOOD	NJ	07456	
MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ TECHNICAL SPECIALIST Aggregate Year-to-Date ▼ 375.00			С		25.00
Primary General Other (specify) ▼ 375.00					
		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			100.00

ITEMIZED RECEIPTS	ν)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE			Date of Receipt
Mailing Address 995 PINES TERR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51119
FRANKLIN LAKES FEC ID number of contributing federal political committee.	NJ C	07417	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n VP FINANCE	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
Mailing Address 1970 WOODLANDS	S PL		0 7 1 9 Y Y Y Y Y
City	State OH	Zip Code	Transaction ID: INC.A.51252
POWELL FEC ID number of contributing federal political committee.	C	43065	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
Mailing Address 251 POPLAR AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51075
HACKENSACK FEC ID number of contributing federal political committee.	NJ C	07601	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	rechnology	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optiona	l)		100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 303 (check only one) X 11a
An	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and ad	dress of any political committee to	
	Full Name (Last, First, Middle Initial) MR PETER KENNY Mailing Address 6040 BOULEVARD E	E APT 28G		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51360
	WEST NEW YORK FEC ID number of contributing federal political committee.	C	07093	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MS LISA KETNER Mailing Address 7 POINT VIEW	1		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51240
	OAKLAND FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MEM	n BER STRATEGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) MS INNA KHANIN Mailing Address 3403 SPRINGBROO	K DRIVE		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51419
	EDISON FEC ID number of contributing federal political committee.	C	08820	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 375.00	
SI	JBTOTAL of Receipts This Page (optional)	1		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any person ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER Mailing Address 121 CONKLING TOW City CHESTER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NY 10918 C Occupation SR DIR ACCT MGMT Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y O 7 1 9 2 0 0 8 Transaction ID: INC.A.51371 Amount of Each Receipt this Period 50.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) KENNETH KLEPPER Mailing Address 295 GLEN PLACE City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NJ 07417 C Occupation PRES & CHIEF OPERATING OFFIC Aggregate Year-to-Date	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51405 Amount of Each Receipt this Period 192.30
Primary General Other (specify) Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY Mailing Address 1016 FAIRWOOD LA City ACWORTH FEC ID number of contributing federal political committee.	2884.50	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer ACCREDO HEALTH GROUP Receipt For:	AVP MANAGED CARE Aggregate Year-to-Date ▼ 375.00	267.30

SCHEDULE A (FEC Form 3)	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN Mailing Address 555 FORBUSH ST	REET		Date of Receipt
City BOONTON EEC ID number of contributing	State NJ	Zip Code 07005	Transaction ID: INC.A.51363 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 0	n CLIENT RETAIL	25.00
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STRE	ET		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51098
BOWLING GREEN FEC ID number of contributing federal political committee.	OH C	43402	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n _ ACCT EXEC	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY	•		Date of Receipt
Mailing Address 143 DEERFIELD 1	TERRACE		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51127
MAHWAH FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R PRODUCT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option	al)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI Mailing Address 60 BEECH ROAD City RANDOLPH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07869 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07417 C Occupation VP E-COM STRATEGY & DELIVERY Aggregate Year-to-Date 825.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code OH 43221 C Occupation REGIONAL VP PHARMACIES Aggregate Year-to-Date 750.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		130.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 303 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	e name and add	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MR MANOJ KUMAR Mailing Address 7 SUNRISE WAY City	State	Zip Code	Date of Receipt 0 7 1 9 2 0 0 8 Transaction ID: INC.A.51281
	TOWACO FEC ID number of contributing federal political committee.	C	07082	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n ENT REQUIREMENTS • Year-to-Date ▼ 375.00	
 3.	Full Name (Last, First, Middle Initial) MATTHEW KUPFERBERG Mailing Address 3235 CAMBRIDGE AV	/ENUE, AP	Г. #2J	Date of Receipt 0 7 1 9 2 0 0 8
	City BRONX	State NY	Zip Code	Transaction ID: INC.A.51459
	FEC ID number of contributing federal political committee.	C	10463	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATTO		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00	
_	Full Name (Last, First, Middle Initial) JAMES LANGLEY Mailing Address 10921 MAIN RANGE 7	TRAIL		Date of Receipt 0 7 1 9 2 0 0 8
	City LITTLETON	State CO	Zip Code 80127	Transaction ID: INC.A.51496
	FEC ID number of contributing federal political committee.	C	00127	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	n IBURSEMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)			100.00

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
Mailing Address 7017 COBALT WAY	Y		07 19 2008
City CITRUS HEIGHTS	State CA	Zip Code 95621	Transaction ID: INC.A.51242 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n GOVERNMENT AFFAIRS	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1875.00	
Full Name (Last, First, Middle Initial) JOSEPH LENZ			Date of Receipt
Mailing Address 6 SHERMAN AVE			0 7 1 9 2 0 0 8
City WALDWICK	State NJ	Zip Code 07463	Transaction ID: INC.A.51436 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07403	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PERF	n FORMANCE STRATEGY	
Receipt For: Primary General Other (specify) ▼	- t - t	e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) PATRICIA LETCHWORTH			Date of Receipt
Mailing Address 3133 HEATHSTON	E COVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38138	Transaction ID: INC.A.51497
FEC ID number of contributing federal political committee.	C	30130	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR REIN	n MBURSEMENT	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optiona	J)		175.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	· A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROBERT LONG			Date of Receipt
Mailing Address 18 HARLIND TER	RACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51233
RAMSEY FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	. ACCT EXEC	
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GRO	VE CT		0 7 1 9 2 0 0 8
City	State PA	Zip Code	Transaction ID: INC.A.51140
GIBSONIA FEC ID number of contributing federal political committee.	C	15044	Amount of Each Receipt this Period 30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) MS DEBRA LUDGATE			Date of Receipt
Mailing Address 238 WOODLAND	AVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SUMMIT	State NJ	Zip Code 07901	Transaction ID: INC.A.51183 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.001	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MARKETING	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (option	nal)		105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any personame and address of any political committee to COLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS VERONA MACMAHON Mailing Address 1504 WEST CULLOM UNIT G City CHICAGO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	AVE State Zip Code IL 60613 C Occupation SR DIR ACCT MGMT OPS Aggregate Year-to-Date	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51382 Amount of Each Receipt this Period 25.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR KENNETH MALLEY Mailing Address 764 W. SADDLE RIVE City HO HO KUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	R ROAD State Zip Code NJ 07423 C Occupation VP PRODUCT & CHANNEL MKTING Aggregate Year-to-Date	Date of Receipt M M M J D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO Mailing Address 33 HICKORY TAVERN City GILLETTE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07933 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	VP FINANCE Aggregate Year-to-Date ▼ 750.00	125.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 212 / 303 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and address o	f any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS ILENE MARCUS Mailing Address 97 BLUEBERRY DR City		p Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
WOODCLIFF LAKE DR		7675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7075	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SR DIR FINAN Aggregate Year-t		
Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI Mailing Address 351 SOUND BEACH A	VENUE		Date of Receipt 0 7 1 9 2 0 0 8
City	State Zi	p Code	Transaction ID: INC.A.51124
OLD GREENWICH	CT 0	6870	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICAR	E OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) LORI MARINO			Date of Receipt
Mailing Address 31 UNDERWOOD DR	IVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zi	p Code	Transaction ID: INC.A.51463
WEST ORANGE	NJ 0	7052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GENERA	AL COUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 750.00]
SUBTOTAL of Receipts This Page (optional)		······	100.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or fo	information copied from such Reports and Sor commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 1	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A. _	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL			Date of Receipt
	Mailing Address W144 N7150 TERRA	CE DRIVE		07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51191
_	MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		50.00
_	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
ı	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
	Full Name (Last, First, Middle Initial) SHELLY MARTIN	Date of Receipt		
-	Mailing Address 9536 DOE MEADOW	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.51501
- I	GERMANTOWN FEC ID number of contributing	C	38139	Amount of Each Receipt this Period 25.00
_	ederal political committee.			
_	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	on	
I	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		375.00	
	Full Name (Last, First, Middle Initial) THOMAS MARTIN	Date of Receipt		
1	Mailing Address 1882 E LAUREL HOLI	LOW		07 19 / Y Y Y Y Y Y Y
	CERMANITOWN	State	Zip Code	Transaction ID: INC.A.51498
_	GERMANTOWN	TN	38139	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		50.00
_	Name of Employer ACCREDO HEALTH GROUP	Occupation VP COR	on P STRAT BUS DEV	
I	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		750.00	
SU	BTOTAL of Receipts This Page (optional)	1		125.00
	TAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 303 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TODD MARTIN Mailing Address 11825 SHEPPARD	OS CROSSING		Date of Receipt
City CLARKSVILLE	State MD	Zip Code 21029	Transaction ID: INC.A.51152 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	 	ENERAL MGR Year-to-Date ▼ 2884.50	
Full Name (Last, First, Middle Initial) MR EDWARD MARTINEZ Mailing Address 35 SALTER PLACE	E		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51423
MAPLEWOOD FEC ID number of contributing federal political committee.	NJ C	07040	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS		PRODUCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR ROBERT MATCHETT Mailing Address Co. 1 AMENUL 5 DD			Date of Receipt
Mailing Address 27 LAKEVILLE RD	1		07 19 2008
City SUSSEX	State N J	Zip Code 07461	Transaction ID: INC.A.51108 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	'	HNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		242.30

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 303 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY	. V.E		Date of Receipt
	Mailing Address 137 WASHINGTON A	NVE		07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51338
	HILLSDALE	NJ	07642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP DR	ug DISTRIB & CONTROL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2884.50	
	Full Name (Last, First, Middle Initial) MS PATRICIA MAZZONE			Date of Receipt
	Mailing Address 56 PENOBSCOT ST			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51239
	CLIFTON	NJ	07013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	+ +	PRODUCT SVCS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		375.00	
	Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE			Date of Receipt
	Mailing Address 11 JARDINE COURT			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51173
	MORRIS PLAINS	NJ	07950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	, '	ES AND MARKETING	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		750.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		267.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DOUG MCCANN Mailing Address 10201 E. 92ND STRE City OWASSO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State OK C Occupatio DIR PRO	Zip Code 74055 n DDUCT DEVELOPMENT e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) THOMAS MCCANN	Aggregate	375.00	Date of Receipt
Mailing Address 9600 DOVE SPRING City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	State TN C Occupatio VP SALE		Transaction ID: INC.A.51503 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD Mailing Address 0-45 27TH ST City FAIR LAWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07410 n CHNOLOGY e Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 217 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor in ite name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH Mailing Address 87 ROSELAWN RD City HIGHLAND MILLS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 10930 C Occupation ASST GENERAL COUNSEL Aggregate Year-to-Date 2880.00	Date of Receipt M M D D 2 0 0 8 Transaction ID: INC.A.51241 Amount of Each Receipt this Period 192.00
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA Mailing Address 112 GREEN TERRAC City WEST MILFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07480 C Occupation SVP BUSINESS OPS	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS BARBARA MENZEL Mailing Address 921 AMARYLLIS AVE City ORADELL FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼ 2884.65 State Zip Code NJ 07649 C	Date of Receipt O 7
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Occupation DIR BUSINESS PLANNING & ADMIN Aggregate Year-to-Date 375.00	409.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) DANETTE MEREDITH			Date of Receipt
	Mailing Address 600 W 2ND AVE			07 19 2008
	City DERRY	State PA	Zip Code 15627	Transaction ID: INC.A.51474 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SAL		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 375.00	
– В.	Full Name (Last, First, Middle Initial) DAVID MILLER			Date of Receipt
	Mailing Address 7 CLOVER LANE			07 19 2008
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.51057
	FEC ID number of contributing federal political committee.	C	07669	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP LABO	n DR RELATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
_ С.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER			Date of Receipt
O .	Mailing Address 34 MACKENZIE LANE	NORTH		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City DENVILLE	State NJ	Zip Code	Transaction ID: INC.A.51051
	FEC ID number of contributing federal political committee.	C	07834	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation FXFC D	n IR INTERNAL AUDIT	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 450.00	
	SUBTOTAL of Receipts This Page (optional)	1		105.00
T	TOTAL This Period (last page this line number	only)	······································	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 303 (check only one) X		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR GIOVANNI MINARDI			Date of Receipt		
Mailing Address 12 LINCOLN ROAD	Mailing Address 12 LINCOLN ROAD				
City	State	Zip Code	Transaction ID: INC.A.51390		
KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period 25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FECHNOLOGY			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00			
Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY			Date of Receipt		
Mailing Address 106 HAMBURG RC	DAD		07 19 2008		
City PARSIPPANY	State NJ	Zip Code 07054	Transaction ID: INC.A.51064 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		07004	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00			
Full Name (Last, First, Middle Initial) MS JULIANA MOLEK			Date of Receipt		
Mailing Address 17584 WEXFORD	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City EDEN PRAIRIE	State MN	Zip Code 55347	Transaction ID: INC.A.51159		
FEC ID number of contributing federal political committee.	C	33347	Amount of Each Receipt this Period 25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR S	n SPECIAL MARKETS			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00			
SUBTOTAL of Receipts This Page (optional	.0		75.00		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 303 (check only one) X
4	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE Mailing Address 1320 BRONCO CIR			Date of Receipt
				07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51166
	WARRINGTON	PA	18976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		375.00	
	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY			Date of Receipt
	Mailing Address 86 WELLINGTON AV	07 19 2008		
	City State		Zip Code	Transaction ID: INC.A.51041
	SHORT HILLS	NJ	07078	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	, '	ARMACEUTICAL CONTRAC	OT NG
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		2880.00	
	Full Name (Last, First, Middle Initial) MS THERESA MORMILE			Date of Receipt
	Mailing Address 59 VALLEY VIEW TER	3		07 19 YYYY 2008
	City	State	Zip Code	Transaction ID: INC.A.51339
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA	NCE	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		750.00	
Г	SUBTOTAL of Receipts This Page (optional)	1		267.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
)	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY Mailing Address 2 STONEBRIDGE RD			Date of Receipt
				07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51372
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
_ В.	Full Name (Last, First, Middle Initial) MR ROBERT MULLER			Date of Receipt
	Mailing Address 69 FERN PLACE			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51349
	PARAMUS	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		H BUS CLIENT ENROLLMN	т
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
с. С.	Full Name (Last, First, Middle Initial) MS BECKY NAGLE			Date of Receipt
	Mailing Address 64 WALTER AVE			07 19 2008
	City HASBROUCK HEIGHTS	State NJ	Zip Code 07604	Transaction ID: INC.A.51096 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07004	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	on IICAL SVCS	
	Receipt For:	, '	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	375.00]
	SUBTOTAL of Receipts This Page (optional)	1		95.00
	TOTAL This Period (last page this line number	onlv)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH			Date of Receipt
	Mailing Address PO BOX 523	Stata	Zip Code	07 19 2008
	City SUGAR LOAF	State NY	10981	Transaction ID: INC.A.51080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENT	- S
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
В.	Full Name (Last, First, Middle Initial) MS ARLENE NELSON Meiling Address 17 CARFIELD RIACI			Date of Receipt
	Mailing Address 17 GARFIELD PLACE	=		07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51125
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
C.	Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY			Date of Receipt
	Mailing Address 24 CHEROKEE TRAI	L		07 19 2008
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.51232 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on MARKET STRATEGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional) .			100.00
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 303 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL Mailing Address 12001 PEONY CT			Date of Receipt 0 7 1 9 2 0 0 8
City TAMPA FEC ID number of contributing	State FL	Zip Code 33635	Transaction ID: INC.A.51121 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) ▼	Occupation DIR SEC]
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUTH	-		Date of Receipt 0 7 1 9 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.51361
RYE FEC ID number of contributing federal political committee.	C	10580	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR SUNNY OGBONDA			Date of Receipt
Mailing Address 79 LAUREL WOOD	COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51065
ROCKAWAY TOWNSHIP FEC ID number of contributing federal political committee.	NJ C	07866	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	l)	_	100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 224/303 (check only one)		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt		
Mailing Address 274 E FRANKLIN T	Mailing Address 274 E FRANKLIN TPKE				
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.51306		
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	,		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00			
Full Name (Last, First, Middle Initial) MRS SUE OLIVER			Date of Receipt		
Mailing Address 11 LEE DRIVE			M M / D D / Y Y Y Y Y O N O O O O O O O O O O O O O		
City NORTH HALEDON	Zip Code 07508	Transaction ID: INC.A.51318			
FEC ID number of contributing federal political committee.	NJ C	07306	Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY			
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 750.00			
Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN			Date of Receipt		
Mailing Address 4 HIGHGATE CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.51354		
FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period 25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT OPS			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00			
SUBTOTAL of Receipts This Page (optional	al)		125.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 303 (check only one) X	
Ai or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and addr	ress of any political committee to	o solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)	
۸.	Full Name (Last, First, Middle Initial) ALEXANDER ONIK			Date of Receipt	
	Mailing Address 1 SCHINDLER CT			07 19 7 2008	
	City	State NJ	Zip Code	Transaction ID: INC.A.51440	
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	C	07458	Amount of Each Receipt this Period 25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	AL SPECIALIST		
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 375.00		
_	Full Name (Last, First, Middle Initial) MS NATALYA ONIK			Date of Receipt	
	Mailing Address 1 SCHINDLER CT			07 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State		Zip Code	Transaction ID: INC.A.51215	
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECH	HNOLOGY		
	Receipt For: Primary General	Aggregate `	Year-to-Date ▼		
	Other (specify) ▼		375.00		
	Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA	1		Date of Receipt	
	Mailing Address 4 TEAK COURT			07 19 2008	
	City	State	Zip Code	Transaction ID: INC.A.51297	
	RINGWOOD FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period 50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIF	R TECHNOLOGY		
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 750.00		
	SUBTOTAL of Receipts This Page (optional)	I		100.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 226 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. I	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MS DAWN PAGANO		Date of Receipt
Mailing Address 185 PASCACK ROAD City	State Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51296
PARK RIDGE	NJ 07656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR RICHARD PAGANO		Date of Receipt
Mailing Address 185 PASCACK RD		07 19 2008
City	State Zip Code	Transaction ID: INC.A.51292
PARK RIDGE	NJ 07656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	3
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) C. MS GIRA PATEL		Date of Receipt
Mailing Address 5 FOXHILL RUN		07 19 2008
City MONMOUTH JUNCTION	State Zip Code NJ 08852	Transaction ID: INC.A.51205
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	- 3
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 303 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) MR JAY PATEL Mailing Address 14 BROWNSTONE TE			Date of Receipt 0 7 1 9 2 0 0 8
	City HAWTHORNE	State NJ	Zip Code 07506	Transaction ID: INC.A.51428 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		OM STRAT & DELIV • Year-to-Date ▼ 375.00	1
 3.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN Mailing Address 2001 MEADOWS AVE	NUE		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51255
	LANTANA	TX	76226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00]
	Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI Mailing Address 211 WILTSIE COURT			Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51176
	WYCKOFF FEC ID number of contributing federal political committee.	C	07481	Amount of Each Receipt this Period 20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFC	n) TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			70.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 228 / 303 (check only one) X
0	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	e name and add	dress of any political committee to	o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) JIMMY PERREN Mailing Address 1250 BRAY PARK DR City	EAST	Zip Code	Date of Receipt 0 7 1 9 2 0 0 8 Transaction ID: INC.A.51478
	COLLIERVILLE FEC ID number of contributing federal political committee.	TN	38017	Amount of Each Receipt this Period 75.00
	Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼		n ULATORY COMPLIANCE e Year-to-Date ▼ 975.00	
_	Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY Mailing Address 4769 STAVANGER LA	ANE		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51279
	LAS VEGAS FEC ID number of contributing federal political committee.	C	89147	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	n DDUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MR NATHAN PETERSON	ı		Date of Receipt
	Mailing Address 3412 AUTUMN WOOL	DS DRIVE		0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51187
	CHASKA FEC ID number of contributing federal political committee.	C	55318	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n CCT EXEC	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 229 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES			Date of Receipt
Mailing Address 8522 UPLAND LN N		75.00-15	07 19 2008
City	State MN	Zip Code	Transaction ID: INC.A.51147
MAPLE GROVE FEC ID number of contributing	C	55311	Amount of Each Receipt this Period 50.00
federal political committee.	Occupation	n	_
Name of Employer MEDCO HEALTH SOLUTIONS	GENERA	AL MGR GROUP	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		750.00	
Full Name (Last, First, Middle Initial) MARTINE PFLIEGER			Date of Receipt
Mailing Address 44 HENRY TERRAC	CE		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51457
LINCOLN PARK	NJ	07035	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ATTORN		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR THOMAS PIERCE			Date of Receipt
Mailing Address 1050 S. CLARKSON	N ST		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51455
DENVER	CO	80209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABC	n DR RELATIONS	7
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		750.00	
			125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 230 / 303 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) DR PAGE PIGG			Date of Receipt
Mailing Address 9297 ANGLER TRL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51185
MECHANICSVILLE FEC ID number of contributing federal political committee.	C	23116	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS	
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN			Date of Receipt
Mailing Address 29 BLACKWELL AV	07 19 / Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: INC.A.51053
MORRISTOWN FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period 200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00	
Full Name (Last, First, Middle Initial) MS JANET PORAT			Date of Receipt
Mailing Address 5 CRABAPPLE CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONSEY	State NY	Zip Code 10952	Transaction ID: INC.A.51150 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10002	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	`		250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 231 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	he name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LYDIA POTTER Mailing Address 19642 S.W. 88 LOO City DUNNELLON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State FL C Occupation DIR OPS	S Year-to-Date ▼	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51362 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO Mailing Address 10258 WINDSOR W City POWELL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State OH C	Zip Code 43065	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE Mailing Address 875 ALEXANDRIA C City RAMSEY	Aggregate	Zip Code 07446	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation SVP HR		192.30
SUBTOTAL of Receipts This Page (optional)		>	267.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	│ y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET			Date of Receipt
	Mailing Address 135 HOLLYBERRY DF City	RIVE State	Zip Code	07 19 2008
	HOPEWELL JUNCTION	NY	12533	Transaction ID: INC.A.51326 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (n CONTRACT ADMINISTRATIO	– ON
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
– В.	Full Name (Last, First, Middle Initial) MR MARK PROULX			Date of Receipt
	Mailing Address 20 BRANDY RIDGE Re	07 19 2008		
	City	State	Zip Code	Transaction ID: INC.A.51395
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PH	n ARMACY & CUST SVC OPS	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2884.65	
_ С.	Full Name (Last, First, Middle Initial) SYED QUADRI	I		Date of Receipt
	Mailing Address 6040 KENNEDY BLVD APT 30N	EAST		07 19 2008
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.51389
	FEC ID number of contributing federal political committee.	C	07093	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRI		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 375.00	
Γ	SUBTOTAL of Receipts This Page (optional)			242.31
 	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 233 / 303 (check only one) X
A Or	ny information copied from such Reports and strong for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt
				07 19 2008
	City KELLER	State TX	Zip Code 76248	Transaction ID: INC.A.51412 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	702-10	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) MS FRANCES RAO			Date of Receipt
	Mailing Address 19 ROSS ROAD			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51077
	SCARSDALE NY		10583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		IR REGULATORY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		375.00	
	Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO	Date of Receipt		
	Mailing Address 57660 BEAVER VALL	EY RD		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: INC.A.51367
	QUAKER CITY FEC ID number of contributing federal political committee.	C	43773	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	eligibility	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 234 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee to NC. POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JOANN REED Mailing Address 4 ANTLER CT City MATAWAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07747 C Occupation SPECIAL ADVISOR TO CEO Aggregate Year-to-Date 980.70	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address 8475 DUNHAM S City TAMPA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS Mailing Address 43 HAROLD ST. UNIT B City COS COB FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code CT 06807 C Occupation EXEC DIR RECONCILIATION Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	140.38

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 235 / 303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
Mailing Address 8 CARLA ANN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51364
FLANDERS FEC ID number of contributing federal political committee.	NJ C	07836	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	<u> </u>
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS			Date of Receipt
Mailing Address 412 RIVER MEWS	0 7 1 9 2 0 0 8		
City	State NJ	Zip Code	Transaction ID: INC.A.51409
EDGEWATER FEC ID number of contributing federal political committee.	C	07020	Amount of Each Receipt this Period 70.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) SUZANNE RICHARDS			Date of Receipt
Mailing Address 21357 W 115TH TE	ER		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OLATHE	State KS	Zip Code 66061	Transaction ID: INC.A.51479
FEC ID number of contributing federal political committee.	C	0001	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation SR MGR	BUS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	l		145.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 236 / 303 (check only one) X	
A C	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.	
∠ . .	Full Name (Last, First, Middle Initial) MR DAVID ROBARGE Mailing Address 4565 QUEENSLAND L	N N		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City MINNEAPOLIS	State MN	Zip Code 55446	Transaction ID: INC.A.51107 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	33440	25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		NICAL SVCS e Year-to-Date ▼ 375.00		
_ 3.	Full Name (Last, First, Middle Initial) MS TRACEY RODGERS-LENGE Mailing Address 19 FARMINGTON COL	Full Name (Last, First, Middle Initial)			
	City	State	Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51058	
	RAMSEY	NJ	07446	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		25.00	
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR CLIN	n NICAL SVCS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00		
	Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC Mailing Address 22 PAPOOSE TRAIL			Date of Receipt 0 7 1 9 2 0 0 8	
	City	State	Zip Code	Transaction ID: INC.A.51408	
	ANDOVER FEC ID number of contributing federal political committee.	NJ C	07821	Amount of Each Receipt this Period 25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PUE	n BLIC AFFAIRS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00		
	SUBTOTAL of Receipts This Page (optional)			75.00	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 237/303 (check only one) X 11a
A o	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
_	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
	Mailing Address 96 LEHMANN STREE	T		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: INC.A.51162
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRESIDI	n ENT SYSTEMED	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	
	Full Name (Last, First, Middle Initial) DAVID ROOT			Date of Receipt
	Mailing Address 212 SPRING BRANCH	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.51461
	WAVERLY	VA	23890	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR STA	n TE GOVERNMENT AFFAIR	S
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
_	Full Name (Last, First, Middle Initial) MS DONNA ROSEN	<u> </u>		Date of Receipt
	Mailing Address 7 RED OAK LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.51327
	FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS-	n -CLINICAL TECH	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		750.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			267.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 238 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS Mailing Address 7227 RAMOTH DRIV City JACKSONVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code FL 32226 C Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR RICHARD RUBINO Mailing Address 3 APACHE DRIVE City OAKLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07436 C Occupation SVP FINANCE & CHIEF FIN OFFCR Aggregate Year-to-Date 2895.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK Mailing Address 21 SKY TOP RIDGE City OAKLAND FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code NJ 07436 C Occupation VP CLINICAL MGMT & SVCS Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	•	293.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 239 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO Mailing Address 66 FINCH RD City RINGWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07456 C Occupation VP PROF PRA Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS MARY RYAN Mailing Address 456 RICHMOND AVEN City MAPLEWOOD FEC ID number of contributing federal political committee.	0 0 0 0 0 0 0 0	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP PHARMACY REGULATORY Aggregate Year-to-Date ▼ 1175.10	
Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS Mailing Address 4836 MIDDLE RD City ALLISON PARK	State Zip Code PA 15101	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMENTS	25.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)		123.34

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 240 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to a lic. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RYAN SADLER Mailing Address 85 VANCE ST. #20 City MEMPHIS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	Occupation DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date 225.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE Mailing Address 7 AHERN WAY City WEST ORANGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07052 C Occupation SR DIR ENTERPRISE BUS INTELLIG Aggregate Year-to-Date 375.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY Mailing Address 230 FAIRFIELD A' City RIDGEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	VE. State Zip Code NJ 07450 C Occupation VP FINANCE Aggregate Year-to-Date ▼ 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	al)	75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 241 / 303 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS BETH SAVARE Mailing Address 27 JONES LN City BLAIRSTOWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07825 C Occupation SR DIR PHARM OPS Aggregate Year-to-Date ▼ 375.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS TRINA SAYLER Mailing Address 56 LAKESIDE DRIVE City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07446 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 225.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT Mailing Address 339 GRAMERCY PL City GLEN ROCK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07452 C Occupation SVP FINANCIAL & ANALYTICAL SVC Aggregate Year-to-Date 750.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 242/303 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ			Date of Receipt
Mailing Address 9111 N KARLOV			07 19 YYYY 2008
City SKOKIE	State IL	Zip Code	Transaction ID: INC.A.51103
FEC ID number of contributing federal political committee.	C	60076	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For: Primary General Other (specify)	- 	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT			Date of Receipt
Mailing Address 7330 EVEREST LA	NE - NORTH		0 7 1 9 2 0 0 8
City MAPLE GROVE	State MN	Zip Code	Transaction ID: INC.A.51366
FEC ID number of contributing federal political committee.	C	55311	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n L ACCT EXEC	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR LEONARD SCOTT			Date of Receipt
Mailing Address 13514 MOTTLESTO	ONE DRIVE NW	V	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PICKERINGTON	State OH	Zip Code 43147	Transaction ID: INC.A.51253
FEC ID number of contributing federal political committee.	C	45147	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REG DIF	n R ACCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional			125.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 243 / 303 (check only one) X
or for commercial purposes, other than usi	and Statements may not be sold or used by any pering the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE Mailing Address 3021 E MILLCRE	EK ROAD	Date of Receipt 0 7 1 9 2 0 0 8
City SALT LAKE CITY FEC ID number of contributing	State Zip Code UT 84109	Transaction ID: INC.A.51049 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (specify) ▼	Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date 750.00	
Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ Mailing Address 1220 CROSSING	i WAY	Date of Receipt M M
City WAYNE FEC ID number of contributing federal political committee.	State Zip Code NJ 07470	Transaction ID: INC.A.51079 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV Mailing Address 66 PROSPECT A	VE	Date of Receipt
City WESTWOOD FEC ID number of contributing federal political committee.	State Zip Code NJ 07675	Transaction ID: INC.A.51386 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	nal)	125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 244 / 303 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CRE	EEK AVE		Date of Receipt
City LAS VEGAS	State NV	Zip Code 89148	Transaction ID: INC.A.51238 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		60.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP OPS Aggregate	Year-to-Date ▼ 1560.00	
Full Name (Last, First, Middle Initial) MR JOHN SHEA Mailing Address 62 FRANKLIN TUI	RNPIKE		Date of Receipt 0 7 1 9 2 0 0 8
City	State	Zip Code	Transaction ID: INC.A.51063
ALLENDALE FEC ID number of contributing federal political committee.	NJ C	07401	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC	DUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MR FRANK SHEEHY			Date of Receipt
Mailing Address 119 HAMILTON R	D		07 19 2008
City	State	Zip Code	Transaction ID: INC.A.51118
RIDGEWOOD FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (option	al)		150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 245 / 303 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PETER SHERMAN			Date of Receipt
Mailing Address 139 GATES AVENU	JE		07 19 2008
City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INC.A.51042
FEC ID number of contributing federal political committee.	C	07042	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAGI	n NG COUNSEL	
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JAMES SHIVAS			Date of Receipt
Mailing Address 18 PROSPECT AVE	Ī		07 19 2008
City NORTH ARLINGTON	State NJ	Zip Code 07031	Transaction ID: INC.A.51201
FEC ID number of contributing federal political committee.	C	07031	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRICE		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III			Date of Receipt
Mailing Address 150 CLAREMONT A	AVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LONG BEACH	State CA	Zip Code 90803	Transaction ID: INC.A.51133
FEC ID number of contributing federal political committee.	C	30005	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		100.00

ITEMIZED RE	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 246 / 303 (check only one)
Any information copor for commercial pu	ed from such Reports and rposes, other than using th	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COM	MITTEE (In Full)		ACTION COMMITTEE (a.k.a	
Full Name (Last, JEFFREY SIMEK	First, Middle Initial)			Date of Receipt
Mailing Address	704 SAW PALMETTO	O COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PORT ORANG	E	State FL	Zip Code 32128	Transaction ID: INC.A.51217 Amount of Each Receipt this Period
FEC ID number of federal political c	of contributing	C		192.31
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupatio VP COR	n P COMMUNICATIONS	
Receipt For: Primary Other (spe	General	Aggregate	Year-to-Date ▼ 2884.65	
Full Name (Last, MR LEE SIMON	First, Middle Initial)	-		Date of Receipt
Mailing Address	2390 GREENVIEW F	ROAD		07 19 2008
City NORTHBROC	K	State IL	Zip Code 60062	Transaction ID: INC.A.51373 Amount of Each Receipt this Period
FEC ID number of federal political control	of contributing	C	00002	50.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	
Receipt For: Primary Other (spe	General		Year-to-Date ▼ 750.00	
Full Name (Last, MR JEFFREY SIN	First, Middle Initial)			Date of Receipt
	10 CHERRY TREE L	ANE		M M / D D / Y Y Y Y Y O N N N N N N N N N N N N N N
City KINNELON		State NJ	Zip Code 07405	Transaction ID: INC.A.51248 Amount of Each Receipt this Period
FEC ID number of federal political c		C	07400	50.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Rec	ointe This Page (antional)	1	_	292.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 247 / 303 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
ب 4.	Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO			Date of Receipt
	Mailing Address 564 DALE COURT EA	AST		07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51078
	RIVER VALE	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	450.00	
_ 3.	Full Name (Last, First, Middle Initial) MR JOHN SISTO			Date of Receipt
	Mailing Address 24 MAYBERRY LANE			07 19 2008
	City	State	Zip Code	Transaction ID: INC.A.51305
	MECHANICSBURG	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	- · ·	PHARMACY REGULATORY	,
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify) ▼	0 0	375.00	
. –	Full Name (Last, First, Middle Initial) MR DAVID SITVER			Date of Receipt
	Mailing Address 24 YORKSHIRE AVE			07 19 YYYY 2008
	City	State	Zip Code	Transaction ID: INC.A.51200
	SUFFERN	NY	10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		375.00	
Г		I		1

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 303 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ANN SMITH			Date of Receipt
	Mailing Address 437 GLENDALE RD			0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51204
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n PUBLIC AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	1
_	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	Date of Decision
В.	MR ROBERT SMITH Mailing Address 40 JOSHUA DR T			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.51346
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
_ С.	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR			Date of Receipt
	Mailing Address 23 CEDAR GATE RO	AD		07 19 2008
	City DARIEN	State CT	Zip Code 06820	Transaction ID: INC.A.51401 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00020	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRM	n IAN & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.65	
	SUBTOTAL of Receipts This Page (optional) .	1		267.31
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 249 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ALAN SOKALER Mailing Address 30 MICHELLE WAY City PINE BROOK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07058 C Occupation VP FINANCE Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) BARRY SOUTHERN Mailing Address 3705 MIDDLEBURY V City GREENSBORO FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE Mailing Address 6108 HUNTER LANE City COLLEYVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code TX 76034 C Occupation VP/GM Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 250 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to septimental political ACTION COMMITTEE (a.k.a.	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RALPH STAIANO Mailing Address 1 LAMBROS DRIVE City MONROE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 10950 C Occupation SR DIR BUSINESS REQUIREMENTS Aggregate Year-to-Date 375.00	Date of Receipt M M M D D D 2008 Transaction ID: INC.A.51056 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) PETER STARK Mailing Address 4840 COLE ROAD City MEMPHIS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code TN 38117 C Occupation GROUP VP MANUF SVCS Aggregate Year-to-Date 750.00	Date of Receipt M M M D D D 2 2 0 0 8 Transaction ID: INC.A.51499 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR City WEST HARRISON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 10604 C Occupation GROUP VP FINANCE Aggregate Year-to-Date 750.00	Date of Receipt M M M J D D D Z D O 8 Transaction ID: INC.A.51325 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	• /	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 303 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL F	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) CHANNING STAVE			Date of Receipt
Mailing Address 77 HIGHVIEW AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51460
TUCKAHOE	NY	10707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MARKETING	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS JILL STEARNS			Date of Receipt
Mailing Address 13130 HALSELL DF	3		07 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51376
AUSTIN	TX	78732	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n LACCT EXEC	
Receipt For:		Year-to-Date V	
Primary General Other (specify) ▼		750.00	
Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt
Mailing Address 122 DEMAREST AV	/ENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.51153
EMERSON FEO. ID acceptance of a captification	NJ	07630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify) General		375.00	
			100.00

	LE A (FEC Form 3X D RECEIPTS	(,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 252 / 303 (check only one)
Any information or for commer	on copied from such Reports an color transfer to color than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	COMMITTEE (In Full) HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
	(Last, First, Middle Initial) TEINKELLNER			Date of Receipt
Mailing Ad	dress 1740 HIGHLAND D	RIVE		07 19 2008
City	OVE	State	Zip Code	Transaction ID: INC.A.51193
	mber of contributing itical committee.	C	53122	Amount of Each Receipt this Period 50.00
Name of E MEDCO H	mployer HEALTH SOLUTIONS	Occupation VP CLIN	n ICAL SVCS	
Receipt Fo		Aggregate	Year-to-Date ▼ 750.00	
Full Name	(Last, First, Middle Initial)			Date of Receipt
	dress 8 MILL GLEN CT			07 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.51391
FEC ID nu	mber of contributing itical committee.	C	07436	Amount of Each Receipt this Period 192.31
Name of E MEDCO H	mployer IEALTH SOLUTIONS	Occupation SVP/GM	n ADVANCED CLINICAL SLT	— -NS
Receipt Fo		Aggregate	Year-to-Date ▼ 2884.65	
	(Last, First, Middle Initial) RD STOCKER, JR			Date of Receipt
	dress 80 ALGONQUIN TF	RL		M M / D D / Y Y Y Y Y O N N N N N N N N N N N N N N
City OAKLAN	ID.	State NJ	Zip Code 07436	Transaction ID: INC.A.51154
FEC ID nu	mber of contributing itical committee.	C	0/436	Amount of Each Receipt this Period 50.00
Name of E MEDCO H	mployer IEALTH SOLUTIONS	Occupation SR NATL	n L ACCT EXEC	
Receipt Fo		Aggregate	Year-to-Date ▼ 260.00	
SUBTOTAL	of Receipts This Page (optiona	l)		292.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 253 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANNA STOUL Mailing Address 4 APACHE WAY City MONTVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07045 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE I City ORANGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	DRIVE State Zip Code CT 06477 C Occupation VP PRODUCT DEVELOPMENT Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS PATRICIA STRETE Mailing Address 19275 PAVER BAR City MARYSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	NES ROAD State Zip Code OH 43040 C Occupation DIR CLINICAL THERAPEUTICS Aggregate Year-to-Date ▼ 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 254 / 303 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. MS COLEEN SULLIVAN Mailing Address 38 BARKMILL TERRA	CE		Date of Receipt
City	State	Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51374
MONTVILLE FEC ID number of contributing federal political committee.	NJ C	07045	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	. '	TECHNOLOGY	
Primary General Other (specify) ▼	Aggregati	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA SULLIVAN Mailing Address 21 DENISE DRIVE			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.51324 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS		IANCIAL SVCS	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2884.50	
Full Name (Last, First, Middle Initial) C. MR MARK SULLIVAN			Date of Receipt
Mailing Address 16025 PINE VALE PL.			07 19 7 2008
City <u>MIDLOTHIAN</u>	State VA	Zip Code 23113	Transaction ID: INC.A.51060 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CS	on SYSTEMS PLAN & IMPLEM	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)			242.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 255 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	he name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.	k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS IRENE SUTTON		Date of Receipt
Mailing Address 20 AVENUE @ POF APPT 209	RT IMPERIAL	07 19 2008
City	State Zip Code	Transaction ID: INC.A.51122
WEST NEW YORK FEC ID number of contributing	NJ 07093	Amount of Each Receipt this Period 40.00
federal political committee.		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT		Date of Receipt
Mailing Address 8362 GOLDEN PRA	IRIE DRIVE	0 7 1 9 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.51161
TAMPA	FL 33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial) MS JOANNE TAYLOR		Date of Receipt
Mailing Address 39 ROCKAWAY PLA	ACE	0 7 1 9 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.51062
PARSIPPANY	NJ 07054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CONTRACT ADMINISTRA	ATION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
	1	105.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS) 	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 303 (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR			Date of Receipt
Mailing Address 4241 CHADBOU	RNE DRIVE		07 19 2008
City UPPER ARLINGTON	State OH	Zip Code 43220	Transaction ID: INC.A.51396 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	IICAL SVCS	
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR BOOBALAN THANGAVELU	I		Date of Receipt
Mailing Address 13 BIRCH TERR	ACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MT ARLINGTON	State NJ	Zip Code 07856	Transaction ID: INC.A.51416 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	CAL SPECIALIST	
Receipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MS MELINDA THIEL			Date of Receipt
Mailing Address 27 GARVEY ROA	AD D		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WAYNE	State NJ	Zip Code 07470	Transaction ID: INC.A.51132 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07470	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PRODUCT MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optic	onal)		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 257 / 303 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MELISSA THOMET Mailing Address 721 HINMAN AVE #1E City EVANSTON	State IL	Zip Code 60202	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	, '	n ACCT MGMT OPS • Year-to-Date ▼	25.00
Full Name (Last, First, Middle Initial) MS MARY THORSBY Mailing Address 17326 ELLEN DR City LIVONIA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	. '	Zip Code 48152 n ACCT EXEC Year-to-Date 1125.00	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD Mailing Address 7974 FLAMETREE CT City LAS VEGAS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NV C Occupatio VP/GM	Zip Code 89123 n • Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258 / 303 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN			Date of Receipt
Mailing Address 838 COLONIAL RE)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.51070
FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	n EFIT SYSTEMS SUPPORT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
Mailing Address 713 INDIAN CREE	K RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City AMHERST	State VA	Zip Code 24521	Transaction ID: INC.A.51245
FEC ID number of contributing federal political committee.	C	24321	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (OVERNMENT AFFAIRS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1125.00	
Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
Mailing Address 16 FIELDHEDGE	DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HILLSBOROUGH	State NJ	Zip Code 08844	Transaction ID: INC.A.51380 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00077	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (options	al)		155.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 259 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR KEITH URICH			Date of Receipt
	Mailing Address 12495 SOUTH 1745 E	EAST		07 19 2008
	City DRAPER	State UT	Zip Code 84020	Transaction ID: INC.A.51196 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	04020	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	n IAL VP SALES-SYSTEMED	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
ь В.	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE Mailing Address 31 LINCOLN RD			Date of Receipt
		Ctata	7in Codo	07 19 2008
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.51170 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR ANALYTICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- С.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
	Mailing Address W328 S4230 SPRING	RIDGE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.51472
	WAUKESHA FEC ID number of contributing federal political committee.	C	53189	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, '	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)	1		125.00
f	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 260 / 303 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK Mailing Address 56 ZIMMER AVENUE City MIDLAND PARK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07432 C Occupation DIR FINANCIAL APPLICATIONS Aggregate Year-to-Date 275.00	Date of Receipt M M M J D D D 2008 Transaction ID: INC.A.51086 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE RD City ROCKVILLE CENTRE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 11570 C Occupation VP MKTING Aggregate Year-to-Date 750.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) CHANTAL VEEVAETE Mailing Address 7292 OAKVILLE DRIV City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	E State Zip Code TN 38138 C Occupation GROUP VP HR Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M J D D J Z D O 8 Transaction ID: INC.A.51489 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)		125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 261 / 303 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WIL VELARDE Mailing Address 443 WEST SADDL			Date of Receipt M
City UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	State NJ	Zip Code 07458	Transaction ID: INC.A.51120 Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		TECHNOLOGY 9 Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MR JEFFREY VERNICE Mailing Address 201 WATCHUNG / UNIT #17 City	AVENUE State	Zip Code	Date of Receipt M
BLOOMFIELD FEC ID number of contributing federal political committee.	NJ	07003	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SR DIR N Aggregate]
Full Name (Last, First, Middle Initial) MR GORDON VICKERS Mailing Address 436 MOUNTAIN A	VENUE		Date of Receipt
City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.51039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		25.00
Receipt For: Primary General Other (specify) ▼		CCT EXEC Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		90.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 262 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
۸.	Full Name (Last, First, Middle Initial) MR MUNISH VIJ Mailing Address 11 BOULDER TRAIL City MAHWAH FEC ID number of contributing federal political committee.	State NJ	Zip Code 07430	Date of Receipt M M M
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	- '	n CAL SPECIALIST • Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MS ANNETTE WAGNER Mailing Address 8 INDIAN RUN ROAE)		Date of Receipt 0 7 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: INC.A.51290
	FEC ID number of contributing federal political committee.	C	07853	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	n FECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MR MICHAEL WAIBEL Mailing Address N48 W16381 LONE (DAK LN		Date of Receipt 0 7 1 9 2 0 0 8
	City MENOMONEE FALLS	State WI	Zip Code	Transaction ID: INC.A.51194
	MENOMONEE FALLS FEC ID number of contributing federal political committee.	C	53051	Amount of Each Receipt this Period 15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT OPS	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 225.00	
Γ,	SUBTOTAL of Receipts This Page (optional)	1		65.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Penerts a	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 263 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee to s C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN Mailing Address 450 BEECHMONT	DR	Date of Receipt
City	State Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51299
NEW ROCHELLE	NY 10804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP REGULATORY & MC PROGRAM	AS
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.65	
Full Name (Last, First, Middle Initial) MS THERESE WALKER		Date of Receipt
Mailing Address 363 MULBERRY C	T	07 19 YYYY 2008
City	State Zip Code	Transaction ID: INC.A.51055
WYCKOFF FEC ID number of contributing federal political committee.	NJ 07481	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT MGMT	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE		Date of Receipt
Mailing Address 5445 GOODWIN A	AVENUE	07 19 2008
City	State Zip Code	Transaction ID: INC.A.51420
DALLAS	TX 75206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT LEADER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.65	
SUBTOTAL of Receipts This Page (options	al) >	409.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 264 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pethe name and address of any political committee. POLITICAL ACTION COMMITTEE (a.I	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARI) PD	Date of Receipt
City	State Zip Code	0 7 1 9 2 0 0 8 Transaction ID: INC.A.51250
MOORESTOWN FEC ID number of contributing federal political committee.	NJ 08057	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM Aggregate Year-to-Date ▼	
Other (specify) Full Name (Last, First, Middle Initial) MS CATHERINE WASSON	1500.00	Date of Receipt
Mailing Address 3912 CALLE ANDA	LUCIA	07 19 2008
City	State Zip Code	Transaction ID: INC.A.51073
SAN CLEMENTE	CA 92673	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL ACCTS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MS BEVERLY WATSON		Date of Receipt
Mailing Address 2 MICHELANGELO		07 19 2008
City	State Zip Code	Transaction ID: INC.A.51293
SOMERSET FEC ID number of contributing federal political committee.	NJ 08873	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BENEFIT DELIVERY SYSTEM	AS
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 265 / 303 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KELLY WEBBER Mailing Address 107 UPPER SADDLE City	E RIVER ROA	D Zip Code	Date of Receipt 0 7 1 9 2 0 0 8 Transaction ID: INC.A.51229
MONTVALE FEC ID number of contributing federal political committee.	NJ C	07645	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP CORF Aggregate		
Full Name (Last, First, Middle Initial) MARK WEGRYN Mailing Address 1717 DYMOKE DRIV	/E		Date of Receipt 0 7 1 9 2 0 0 8
City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.51203 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP QA	AND PRODUCT INTEGRA	TION
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) LOWELL WEINER			Date of Receipt
Mailing Address 1 BURGESS COURT	-		0 7 1 9 2 0 0 8
City WESTFIELD	State N J	Zip Code 07090	Transaction ID: INC.A.51458 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORF	COMMUNICATIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)			175.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 266 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal he name and address of any political committee to . POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH Mailing Address 309 WATERVIEW D City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07417 C Occupation PRES, CEO ACCREDO Aggregate Year-to-Date 2884.65	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR KENNETH WERMES Mailing Address 26037 N WRANGLE City SCOTTSDALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) MR PETER WHITE Mailing Address 2241 E. PINCHOT A #17F City PHOENIX FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	1125.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 375.00	292.31

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 267 / 303 (check only one) X
or for commercial purposes, ot	her than using the name and ac n Full)	ay not be sold or used by any persiddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd MS COLETTE WILSON Mailing Address 16608 5 City LYNNWOOD FEC ID number of contribut federal political committee. Name of Employer MEDCO HEALTH SOLUTION Receipt For:	State WA ting Occupation SR NAT	Zip Code 98037 on TL ACCT EXEC te Year-to-Date ▼	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51149 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middoms BEVERLY WINKLER Mailing Address 17 LYN City VERONA		375.00 Zip Code 07044	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contribut federal political committee. Name of Employer MEDCO HEALTH SOLUTI Receipt For: Primary Ger Other (specify) ▼	Occupation SR DIR	on ORG DEV te Year-to-Date ▼	25.00
Full Name (Last, First, Midd MR MICHAEL WISNIEWSKI Mailing Address 23 DRL City PARSIPPANY FEC ID number of contribut federal political committee. Name of Employer	State NJ	Zip Code 07054	Date of Receipt M M
Name of Employer MEDCO HEALTH SOLUTI Receipt For: Primary Ger Other (specify) ▼	ONS SR DIR	CONTRACT ADMINISTRAT te Year-to-Date ▼ 375.00	ION
SUBTOTAL of Receipts This	Page (optional)		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 268 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW RO City TOWACO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	AD State Zip Code NJ 07082 C Occupation VP MEDICARE FINANCE Aggregate Year-to-Date ▼ 750.00	Date of Receipt 0 7 19 2008 Transaction ID: INC.A.51156 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACE City PISCATAWAY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 08854 C Occupation SR DIR RRA Aggregate Year-to-Date 450.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS ANNA WONG Mailing Address 64-20 BELL BLVD City BAYSIDE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 11364 C Occupation VP INSURED SOLUTIONS Aggregate Year-to-Date 750.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		130.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 269 / 303 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JUDITH WOOD			Date of Receipt
Mailing Address 76 COLONIAL ROA	.D		07 19 2008
City STILLWATER	State NY	Zip Code 12170	Transaction ID: INC.A.51368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12170	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) BRENDA WRIGHT	I		Date of Receipt
Mailing Address 1834 HUNTERS CR	REEK DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>GERMANTOWN</u>	State TN	Zip Code 38138	Transaction ID: INC.A.51486 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP QUA	n LITY INTEGRITY HEALTH	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY	1		Date of Receipt
Mailing Address 793 LINCOLN AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City POMPTON LAKES	State NJ	Zip Code 07442	Transaction ID: INC.A.51114 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07442	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line numb	per only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 270 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SARAH YINGLING Mailing Address 901 ST MARKS AVE City WESTFIELD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07090 C Occupation SR DIR PRODUCT MGMT Aggregate Year-to-Date	Date of Receipt M M M
Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR Mailing Address 219 SPOOK ROCK R City SUFFERN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	D. State Zip Code NY 10901 C Occupation VP E-COM DEV Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) MS JILL ZELMAN Mailing Address 43604 EMERALD DU City LEESBURG FEC ID number of contributing federal political committee.	750.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	SR DIR CONSOLIDATION PLAN Aggregate Year-to-Date ▼ 375.00	100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 271 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any personderess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ANDREA ZICCARELLI Mailing Address 6550 HERONWOOD	DD		Date of Receipt
	Mailing Address 6550 HERONWOOD	טת		07 19 2008
	City MEMPHIS	State TN	Zip Code	Transaction ID: INC.A.51131
	FEC ID number of contributing federal political committee.	C	38119	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS	DEV AND MARKETING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- В.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW DR	IVF		Date of Receipt
				07 19 2008
	City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.51190 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70170	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
- C.	Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO			Date of Receipt
	Mailing Address 726 HIGH MOUNTAIL	N ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.51425 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co	on OUNSEL	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)	1		100.00
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 303 (check only one) X 11a
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOHN PATRICK DRISCOLL Mailing Address 6 TREMONT STREE City		Date of Receipt 0 7 2 5 2 0 0 8 Transaction ID: INC.A.51030
COS COB	CT 06807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation PRESIDENT - INSURED AND EMER Aggregate Year-to-Date 5000.00	RGING MARKE
Full Name (Last, First, Middle Initial) MARGERY F NATHANSON Mailing Address 100 WINSTON DRIV	VE, NO 16C N	Date of Receipt 0 7 2 5 2 0 0 8
City	State Zip Code	Transaction ID: INC.A.51031
CLIFFSIDE PARK	NJ 07010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer MEDCO HEALTH SERVICES, IN- C.	Occupation ASSISTANT COUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00]
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO Mailing Address 26 DAYLILY DRIVE		Date of Receipt 0 7
City	State Zip Code	Transaction ID: INC.A.51918
MOUNT LAUREL FEC ID number of contributing federal political committee.	NJ 08054	Amount of Each Receipt this Period 15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
	I	5665.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 273 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and address of any political committe	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 3380 SADDLEBROOM City LAS VEGAS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NV 89141 C Occupation DIR PHARM PRACTICE Aggregate Year-to-Date	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS GWEN BRADY Mailing Address 219 E. COMO AVENU City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	T50.00 State Zip Code OH 43202 C Occupation DIR BUSINESS PLANNING Aggregate Year-to-Date ▼ 375.00	Date of Receipt M M M / D D D / Y Y Y Y Y O 7 26 2008 Transaction ID: INC.A.51603 Amount of Each Receipt this Period 12.50
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIST. City VERADALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code WA 99037 C Occupation VP OPS Aggregate Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	300.00	47.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 274 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COL	JRT 		07 26 7 2008
	City PLANT CITY	State FL	Zip Code 33567	Transaction ID: INC.A.51744 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
В.	Full Name (Last, First, Middle Initial) MR WILLIS DINGLE Mailing Address 905 SW SCRUB OAK	, A)/F		Date of Receipt
	Mailing Address 905 SW SCRUB OAK	AVE		07 26 2008
	City PALM CITY	State FL	Zip Code 34990	Transaction ID: INC.A.51619 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01000	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	on	7
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00	
_ C.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL	-		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC.A.51750 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	, 0202	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NAT	on IONAL SERVICE CENTER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
	SUBTOTAL of Receipts This Page (optional) .	1		100.00
T	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2/5/303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt
Mailing Address 544 DENMOOR C	OURT		07 26 2008
City	State	Zip Code	Transaction ID: INC.A.51562
GALLOWAY FEC ID number of contributing federal political committee.	OH C	43119	Amount of Each Receipt this Period 12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12224 MONTCAL	M STREET		07 26 YYYYY
City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.51807
FEC ID number of contributing federal political committee.	C	+0002	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 725.00	
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GRO	VE CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.51614
FEC ID number of contributing federal political committee.	C	13044	Amount of Each Receipt this Period 30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 675.00	
SUBTOTAL of Receipts This Page (option	al)		67.50

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 276 / 303 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN Mailing Address 2001 MEADOWS AVE	ENII IE		Date of Receipt
		LINUL		07 26 2008
	City	State	Zip Code	Transaction ID: INC.A.51729
	LANTANA	TX	76226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
_	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			07 26 2008
	City	State	Zip Code	Transaction ID: INC.A.51882
	KELLER	TX	76248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		750.00	
	Full Name (Last, First, Middle Initial) MRS MONICA REED			Date of Receipt
	Mailing Address 8475 DUNHAM STAT	ION DRIVE		07 26 2008
	City	State	Zip Code	Transaction ID: INC.A.51695
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	, '	ARM PRACTICE	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		750.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00

ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2///303 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt
Mailing Address 266 BRUSHY CRE	EK AVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Z 0 0 8
City LAS VEGAS	State NV	Zip Code	Transaction ID: INC.A.51712
FEC ID number of contributing federal political committee.	C	89148	Amount of Each Receipt this Period 60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1560.00	
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
Mailing Address 6108 HUNTER LAI	NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.51740
FEC ID number of contributing federal political committee.	C	70034	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
Mailing Address 8362 GOLDEN PR	AIRIE DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.51634 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00047	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (options	al)		135.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 278 / 303 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD Mailing Address 7974 FLAMETREE (City LAS VEGAS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NV C Occupation VP/GM	Zip Code 89123 n • Year-to-Date ▼	Date of Receipt M M M / 26 / 2008 Transaction ID: INC.A.51705 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARD City MOORESTOWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation VP/GM	Zip Code 08057 n • Year-to-Date ▼ 1500.00	Date of Receipt M M M / 26 / 2008 Transaction ID: INC.A.51724 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW D City LOVELAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State OH C Occupation VP/GM	Zip Code 45140 n e Year-to-Date ▼	Date of Receipt O 7 26 2008 Transaction ID: INC.A.51663 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)))	100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 279 / 303 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) WILLIAM ROPER Mailing Address 1135 BURNING TF			Date of Receipt 0 7 3 1 2 0 0 8
City Chapel Hill	State NC	Zip Code 27517	Transaction ID: INC.A.51023 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer UNC SCHOOL OF MEDICINE	Occupation DEAN	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	51788.58

A.

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the led Summary Page	FOR LINE NUMBER: PAGE 280 / 303 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION	I COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) BANK OF MARIN Mailing Address 50 MADERA BLVD.			Date of Receipt O 7
City CORTE MADERA	State Zip CA 949	Code 925	Transaction ID: INC.A.51032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		116.04
Name of Employer	Occupation		INTEREST EARNED
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 757.08	

SUBTOTAL of Receipts This Page (optional)	>	116.04
TOTAL This Period (last page this line number only)	•	116.04

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C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 23 24 25 26
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	TION ACTION COMMITT	/ · · · · · · · · · · · · · · · · · ·	
MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a. M	edco Health PAC)
Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, Mailing Address 1415 L STREET, STE. 12	· · · · · · · · · · · · · · · · · · ·	Р	Transaction ID: EXP.B.51024 Date of Disbursement O 7 M / D 1 7 Y Y Y O Y 8
•	State Zip Code CA 95814		Amount of Each Disbursement this Period
Purpose of Disbursement LEGAL & ACCOUNTING FEES	5/1 55511	001	1913.23
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
BANK OF MARIN			Transaction ID: EXP.B.50998 Date of Disbursement
Mailing Address 50 MADERA BLVD.			07 7 21 7 2008
•	State Zip Code CA 94925		Amount of Each Disbursement this Period
Purpose of Disbursement BANK FEE		001	119.81
Candidate Name		Category/ Type	
Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, N	MUELLER, & NAYLOR, LL	P	Transaction ID: EXP.B.51026 Date of Disbursement
Mailing Address 1415 L STREET, STE. 12	200		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & 2 & 0 & 0 & 8 \\ 2 & 0 & 0 & 8 \end{bmatrix}$
SÁCRAMENTO	State Zip Code CA 95814		Amount of Each Disbursement this Period
Purpose of Disbursement LEGAL & ACCOUNTING FEES	I	001	430.00
Candidate Name	(Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .			2463.04
TOTAL This Period (last page this line number only)		•	2463.04

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I		PAGE 282/303
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	and address of any political col			on Scott Committee
MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITTE	EE (a.k.a. M	edco Health PA	C)
Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE			Transaction ID: Date of Disburse	EXP.B.50983 ement
Mailing Address P.O. BOX 1776			07 / 2	1 2008
•	State Zip Code PA 15042		Amount of Each	Disbursement this Period
Purpose of Disbursement		011		1000.00
Candidate Name CITIZENS FOR ALTMIRE		Category/ Type		
Senate President	ment For: 2008 Primary X General Other (specify) ▼			
State: PA District: 04 Full Name (Last, First, Middle Initial)				EVD D 50004
COLLINS FOR SENATOR			Date of Disburse	
Mailing Address P.O. BOX 1096				1 2008
•	State Zip Code ME 04402		Amount of Each	Disbursement this Period
Purpose of Disbursement		011		2000.00
Candidate Name COLLINS FOR SENATOR		Category/ Type		
X Senate President	ment For: 2008 Primary X General Other (specify)			
State: ME District: Full Name (Last, First, Middle Initial)			Transaction ID:	EXP.B.50985
CONTINUING A MAJORITY PARTY ACTION	ON COMMITTEE (CAMPAG	C)	Date of Disburse	ement
Mailing Address 5915 EASTMAN AVE., S	UITE 100		07	1 2008
	State Zip Code MI 48640		Amount of Each	Disbursement this Period
Purpose of Disbursement	Г	011		1000.00
Candidate Name CONTINUING A MAJORITY PARTY ACTION	ON COMMITTEE (CAMP-	Category/ Type		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional) .		•		4000.00
TOTAL This Period (last page this line number only)		•		

ITEMIZED D	B (FEC Form 3X)	Use sep	arate schedule(s)		NUMBER: PAGE 283/303
	DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 27	7 one) 22
					or the purpose of soliciting contributions licit contributions from such committee
NAME OF CO	MMITTEE (In Full) ALTH SOLUTIONS INC.				
,	st, First, Middle Initial) ETTE FOR CONGRESS	INC.			Transaction ID: EXP.B.50992 Date of Disbursement
Mailing Addres	s P.O. BOX 61337				$\begin{bmatrix}\begin{smallmatrix}M&7&M\\0&7&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&D\\2&1\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&0&8\end{smallmatrix}\end{bmatrix}$
City DENVER		State CO	Zip Code 80206		Amount of Each Disbursement this Perio
Purpose of Dis				011	1000.00
-	ETTE FOR CONGRESS		0000	Category/ Type	
Office Sought:	Senate President	bursement For: X Primary Other (spe	2008 General ecify) ▼		
,	District: 01 st, First, Middle Initial) E FOR CONGRESS				Transaction ID: EXP.B.50994 Date of Disbursement
Mailing Addres					0 7 M / 2 1 / Y 2 0 0 8 Y
City NEWARK		State NJ	Zip Code 07114		Amount of Each Disbursement this Perio
Purpose of Dis	bursement			011	2000.00
				Cata manu/	
Candidate Nan DON PAYNE	ne E FOR CONGRESS			Category/ Type	
DON PAYNE	X House Dis Senate President	sbursement For: Primary Other (spe	2008 X General ecify)		
Office Sought: State: NJ Full Name (Las	X House Dis	Primary Other (spe	X General		Transaction ID: EXP.B.50995 Date of Disbursement
Office Sought: State: NJ Full Name (Las	X House Dis Senate President District: 10 St, First, Middle Initial) SCHER FOR CONGRES	Primary Other (spe	X General		
Office Sought: State: NJ Full Name (Lase ELLEN TAU)	X House Dis Senate President District: 10 st, First, Middle Initial) SCHER FOR CONGRES 20 PARK RD., SUIT	Primary Other (spe	X General		Date of Disbursement M 7 M / D 2 1 Y Y O 0 8 Y Amount of Each Disbursement this Perio
Office Sought: State: NJ Full Name (Last ELLEN TAU) Mailing Address City BURLINGAN Purpose of Dis	X House Senate President District: 10 St, First, Middle Initial) SCHER FOR CONGRES S 20 PARK RD., SUIT ME Sbursement	Primary Other (spe	X General ecify) ▼ Zip Code	Type 011	Date of Disbursement O 7 Page 1 Page
DON PAYNE Office Sought: State: NJ Full Name (Las ELLEN TAUS Mailing Address City BURLINGAN Purpose of Dis Candidate Nan ELLEN TAUS	E FOR CONGRESS X House Senate President District: 10 St, First, Middle Initial) SCHER FOR CONGRES 20 PARK RD., SUIT ME SUBJECT SCHER FOR CONGRES	Primary Other (special State CA	X General ecify) Zip Code 94010	Type	Date of Disbursement M 7 M / D 2 D / Y Y O V 8 Y Amount of Each Disbursement this Period
DON PAYNE Office Sought: State: NJ Full Name (Las ELLEN TAU Mailing Addres City BURLINGAN Purpose of Dis Candidate Nan	E FOR CONGRESS X House Senate President District: 10 St, First, Middle Initial) SCHER FOR CONGRES 20 PARK RD., SUIT ME SUBJECT SCHER FOR CONGRES	Primary Other (spo	X General ecify) Zip Code 94010 2008 X General	Type 011 Category/	Date of Disbursement M 7 M / D 2 D / Y Y O V 8 Amount of Each Disbursement this Period

	B (FEC FOIIII 3	' Use	Use separate schedule(s) (check			IE NUMBER: PAG				AGL	iE 284 / 303		
ITEMIZED D	ISBURSEMENT	for e	ach category o ailed Summary			21b 27	22 28a		23 28b	24	, F	25 29	
or for commercial p	oied from such Reports a urposes, other than using MMITTEE (In Full) ALTH SOLUTIONS IN	g the name and a	ddress of any p	olitical co	mmit	person fo tee to soli	or the pu cit contr	rpose	e of so	oliciting om such	contril	butions	
•	t, First, Middle Initial) F JOHN BARRASSO 6896 CASPER M	MOUNTAIN RE).				Trans Date o	of Dis	burse	EXP ement		991 20 0 8	Y
City CASPER		State WY	Zip Cod 82601	e			Amou	nt of	Each	Disburs	semen	nt this P	eriod
Purpose of Dist Candidate Nam FRIENDS OF Office Sought: State: WY		Disbursement F X Prima Other			01 Categ Typ	jory/	L.	•			10	000.00	
•	t, First, Middle Initial) MARK WARNER 1029 NORTH RO	OYAL STREET	, 2ND FLOC)R			Date o			D /		986 2 0 ŏ 8	Y
City Alexandria		State VA	Zip Cod 22314)			Amou	nt of	Each	Disburs	semer	nt this P	erioc
Office Sought:	House X Senate President	Disbursement F Prima Other		8	01 Categ Typ	jory/	L.	•			20	000.00	
`	District: t, First, Middle Initial) ONGRESS COMMIT	TEE					Date of	of Dis	burse				
Mailing Address	205 SOUTH 5TH	H AVE., STE. 4	-28				o ^M 7	M /	^D 2	1 /	ÝŽ	2 0 ŏ 8	Y
City LA CROSSE		State WI	Zip Cod 54601	9			Amou	nt of	Each	Disburs			-
Purpose of Dist		TEE			01 Categ Typ	jory/	L.		0 0		, IC	00.00	
Candidate Nam KIND FOR C Office Sought:	X House Senate President District: 03	Disbursement F X Prima Other		neral									

В.

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		IE NUMBER: PAGE 285 / 303							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one) 22	X 2	23	24		25	2 6	
	, -	27	28a	2	28b	28c		29	30b	
Any Information copied from such Reports and State or for commercial purposes, other than using the nan									5	
NAME OF COMMITTEE (In Full)	ard address of any political co		ion contin	outio	113 110	iii sucii (inticc		
MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMITT	EE (a.k.a. M	1edco H	ealth	n PA	C)				
Full Name (Last, First, Middle Initial) LOBIONDO FOR CONGRESS			Date of	f Disl	burse					
Mailing Address P.O. BOX 775			0 7	/	^D 2	1 /	Ž	0 0 8	3	
City MARMORA	State Zip Code NJ 08223		Amour	nt of E	Each I	Disburse	men	t this f	Period	
Purpose of Disbursement		011	L.	_			20	0.00	0	
Candidate Name LOBIONDO FOR CONGRESS		Category/ Type								
Office Sought: X House Disburs Senate President	ement For: 2008 Primary X General Other (specify)									
State: NJ District: 02										
Full Name (Last, First, Middle Initial) PATRICK MURPHY FOR CONGRESS			Date of		burse		3.50	988		
Mailing Address P.O. BOX 868			0 7	/	^D 2	1 '	Ž	0 0 8	3 Y	
City LEVITTOWN	State Zip Code PA 19058		Amour	nt of E	Each I	Disburse	men	t this f	Period	
Purpose of Disbursement		011					10	0.00	0	
Candidate Name PATRICK MURPHY FOR CONGRESS		Category/ Type								
Office Sought: X House Disburs Senate President	ement For: 2008 Primary X General Other (specify)									
State: PA District: 08										
Full Name (Last, First, Middle Initial) PORTER FOR CONGRESS			Transa Date of		burse		3.50	996		
Mailing Address 7840 RED LEAF DR.			0 7	/	^D 2	1 /	Ž	0 Ď 8	3 Y	
City LAS VEGAS	State Zip Code NV 89131		Amour	nt of E	Each I	Disburse	men	t this f	Period	
Purpose of Disbursement		244		_			10	0.00)	
Candidate Name PORTER FOR CONGRESS		011 Category/ Type								
Office Sought: X House Disburs Senate President State: NV District: 03	ement For: 2008 Primary X General Other (specify)									
State. INV DISTINCT. US							_			
SUBTOTAL of Disbursements This Page (optional)		>	<u></u>				40	00.00)	
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMM	ITTEE (a.k.a. M	ledco Health PAC)
Full Name (Last, First, Middle Initial) RELY ON YOUR BELIEFS (ROYB) PA	AC		Transaction ID: EXP.B.50990 Date of Disbursement
Mailing Address 209 PENNSYLVANIA	A AVENUE, SE		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $
City WASHINGTON	State Zip Code DC 20003		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name RELY ON YOUR BELIEFS (ROYB) PA	AC .	Category/ Type	
Senate President	oursement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial) SENATE MAJORITY FUND			Transaction ID: EXP.B.50993 Date of Disbursement
Mailing Address P.O. BOX 32025			$\begin{bmatrix}\begin{smallmatrix}M\\0\end{smallmatrix}7^M&\\&&2\end{smallmatrix}1^D&\\&&2008^Y\\&&&&\\\end{smallmatrix}$
City PHOENIX	State Zip Code AZ 85064		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name SENATE MAJORITY FUND		Category/ Type	
Senate President	oursement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial) TIM MURPHY FOR CONGRESS			Transaction ID: EXP.B.50989 Date of Disbursement
Mailing Address P.O. BOX 24551			$\begin{bmatrix}\begin{smallmatrix}M\\OT\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\OD\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}V\\OD\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}V\\OOOB\end{smallmatrix}\end{bmatrix}^D$
City PITTSBURGH	State Zip Code PA 15234		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name TIM MURPHY FOR CONGRESS		Category/ Type	
Senate President	oursement For: 2008 Primary X General Other (specify) ▼		
State: PA District: 18			
SUBTOTAL of Disbursements This Page (option	onal)		4500.00
TOTAL This Period (last page this line number	·		20500.00

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	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	22 23 24 25
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$\overline{}$	NAME OF COMMITTEE (In Full)				
<u>/</u>	MEDGO HEALTH SOLUTIONS INC. POL	ITICAL AC	TION COMMIT	ΓΤΕΕ (a.k.a. M	fledco Health PAC)
	Full Name (Last, First, Middle Initial) ADELSON FOR STATE SENATE 2008				Transaction ID: EXP.B.49081 Date of Disbursement
	Mailing Address PO BOX 4434		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$		
	City TULSA	State OK	Zip Code 74159		Amount of Each Disbursement this Period
	Purpose of Disbursement			044	500.00
	Candidate Name ADELSON FOR STATE SENATE 2008			011 Category/ Type	
	Office Sought: House Disburs	ement For:	2008	, , , , , , , , , , , , , , , , , , ,	
	Senate	Primary	X General		
	President State: OK District:	Other (spe	ecity) 🔻		
	Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.49072
	BOB STENEHJEM FOR SENATE				Date of Disbursement
	Mailing Address 7475 41ST STREET SE		$\begin{bmatrix}\begin{smallmatrix}M\\0\end{smallmatrix}7^M\end{smallmatrix} \ \ \begin{smallmatrix}D\\0\end{smallmatrix}2^D \ \ \begin{smallmatrix}V\\2\end{smallmatrix}0 \ \ 0 \ 8^Y \\ \\ \end{smallmatrix}$		
	City Bismarck	State ND	Zip Code 58504		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	400.00
	Candidate Name BOB STENEHJEM FOR SENATE			Category/ Type	
	Office Sought: House Disburs Senate	ement For: Primary	2008 X General		
	Procident	Othor (cno			
	State: OK District:	Other (spe	ecity) 🔻		
			eny) 🔻		Transaction ID: EXP.B.49078 Date of Disbursement
	State: OK District: Full Name (Last, First, Middle Initial)		edity) 🔻		
	State: OK District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DANNY MORGA		Zip Code 74864		Date of Disbursement M 7 M
	State: OK District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DANNY MORGA Mailing Address 4706 NBU City	AN 2008	Zip Code		Date of Disbursement M 7 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State: OK District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DANNY MORGA Mailing Address 4706 NBU City PRAGUE	AN 2008 State OK	Zip Code	011 Category/ Type	Date of Disbursement M 7 M
	State: OK District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DANNY MORGA Mailing Address 4706 NBU City PRAGUE Purpose of Disbursement Candidate Name COMMITTEE TO ELECT DANNY MORGA	AN 2008 State OK	Zip Code		Date of Disbursement M 7 M
	State: OK District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DANNY MORGA Mailing Address 4706 NBU City PRAGUE Purpose of Disbursement Candidate Name COMMITTEE TO ELECT DANNY MORGA Office Sought: House Senate President	AN 2008 State OK AN 2008	Zip Code 74864 2008 X General	Category/	Date of Disbursement M 7 M
	State: OK District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DANNY MORGA Mailing Address 4706 NBU City PRAGUE Purpose of Disbursement Candidate Name COMMITTEE TO ELECT DANNY MORGA Office Sought: House Disbursement	State OK AN 2008 AN 2008 ement For: Primary	Zip Code 74864 2008 X General	Category/	Date of Disbursement M 7 M

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	DISBURSEMENTS		category of the Summary Page	21b 27	22 23 24 25 28 28a 28b 28c X 29
					for the purpose of soliciting contributions licit contributions from such committee
NAME OF CO	MMITTEE (In Full) ALTH SOLUTIONS INC. F				
,	Full Name (Last, First, Middle Initial) DAN RUBY FOR REPRESENTATIVE				Transaction ID: EXP.B.49071 Date of Disbursement
Mailing Address 4620 46TH AVE. NW					$\begin{bmatrix}\begin{smallmatrix}M\\O7\end{smallmatrix}^M&\begin{smallmatrix}\\\end{smallmatrix}&\begin{smallmatrix}D\\O2\end{smallmatrix}\end{bmatrix}&\begin{smallmatrix}D\\V&2&0&0&8\\\end{smallmatrix}$
City MINOT		State ND	Zip Code 58703		Amount of Each Disbursement this Period
Purpose of Dis Candidate Nan				011	300.00
DAN RUBY I	FOR REPRESENTATIVE	burgoment For	2008	Category/ Type	
Office Sought: State: ND	House Dis	bursement For: Primary Other (spe	X General		
Full Name (Las	Full Name (Last, First, Middle Initial) DAVE O'CONNELL FOR SENATOR				Transaction ID: EXP.B.49069 Date of Disbursement
Mailing Address 2531 COUNTY RD. 30					$\begin{bmatrix}\begin{smallmatrix}M\\07\end{smallmatrix}^M&\begin{smallmatrix}\\\end{smallmatrix}&\begin{smallmatrix}D\\02\end{smallmatrix}\end{bmatrix}&\begin{smallmatrix}D\\02\end{smallmatrix}\end{bmatrix}&\begin{smallmatrix}Y&Y&Y&0&8\\\end{smallmatrix}$
City LANSFORD		State ND	Zip Code 58750		Amount of Each Disbursement this Period
Purpose of Dis	bursement			011	300.00
	Candidate Name DAVE O'CONNELL FOR SENATOR				
				Type	
DAVE O'COl Office Sought:	NNELL FOR SENATOR House Dist Senate President	bursement For: Primary Other (spe	2008 X General ecify)	Туре	
DAVE O'COI Office Sought: State: ND Full Name (Las	NNELL FOR SENATOR House Dis Senate	Primary Other (spe	X General ecify) ▼	туре	Transaction ID: EXP.B.49065 Date of Disbursement
DAVE O'COI Office Sought: State: ND Full Name (Las	NNELL FOR SENATOR House Senate President District: st, First, Middle Initial) ICH FOR HOUSE OF RE	Primary Other (spe	X General ecify) ▼	туре	Transaction ID: EXP.B.49065 Date of Disbursement M 7 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DAVE O'COI Office Sought: State: ND Full Name (Las DON DIETR	NNELL FOR SENATOR House Senate President District: st, First, Middle Initial) ICH FOR HOUSE OF RE \$ 5302 WEST MAPLE	Primary Other (spe	X General ecify) ▼	туре	Date of Disbursement O 7 O 2 Y Y Y O 8
DAVE O'COI Office Sought: State: ND Full Name (Las DON DIETR Mailing Addres City Grand Forks Purpose of Dis	NNELL FOR SENATOR House Senate President District: st, First, Middle Initial) ICH FOR HOUSE OF RE \$ 5302 WEST MAPLE bursement	Primary Other (specific primary) Other (specif	X General ecify) ▼ IVES Zip Code	011	Date of Disbursement O 7 O 2 Y Y Y O 8
DAVE O'COI Office Sought: State: ND Full Name (Las DON DIETR Mailing Addres City Grand Forks Purpose of Dis Candidate Nam DON DIETR	House Disiserate President District: St, First, Middle Initial) ICH FOR HOUSE OF RE s 5302 WEST MAPLE bursement ne ICH FOR HOUSE OF RE	Primary Other (specific primary) Other (specif	X General ecify) IVES Zip Code 58203		Date of Disbursement M 7 M / D 0 D / Y Y O 0 8 Y Amount of Each Disbursement this Period
DAVE O'COI Office Sought: State: ND Full Name (Las DON DIETR Mailing Addres City Grand Forks Purpose of Dis Candidate Nam	House Disiserate President District: St, First, Middle Initial) ICH FOR HOUSE OF RE s 5302 WEST MAPLE bursement ne ICH FOR HOUSE OF RE	Primary Other (spo	X General ecify) IVES Zip Code 58203 IVES 2008 X General	011 Category/	Date of Disbursement M 7 M / D 0 D / Y Y O 0 8 Y Amount of Each Disbursement this Period

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	s)		R LINE ck only	NUMBE	R:	Į	PAGE	289 / 303
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	23 28k) 🗎 2	8c X	25 <u> </u>
	y Information copied from such Reports and Sta or commercial purposes, other than using the n									
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	, , , , , , , , , , , , , , , , , , ,								
<u>v </u>	Full Name (Last, First, Middle Initial) DWIGHT COOK FOR SENATE Mailing Address 1408 17TH ST. SE						of Disbu	D: EX		064 0 0 8 °
	City MANDAN	State Zip Code ND 58554				Amou	nt of Ea	ch Disbu	ırsement	this Period
	Purpose of Disbursement			011					20	00.00
	Candidate Name DWIGHT COOK FOR SENATE	.5		itegor Type	·y/					
	Office Sought: House Disbu	rsement For: 2008 Primary X General Other (specify) ▼								
	Full Name (Last, First, Middle Initial) FRIENDS OF CHARLIE LASTER 2008							D : EX	P.B.490	82
	Mailing Address 102 E. HIGHLAND					0 ^M 7	M / [0 2	y y	0 0 8 °
	City Shawnee	State Zip Code OK 74801				Amou	nt of Ea	ch Disbu		this Period
	Purpose of Disbursement Candidate Name		_	011 ategor	·v/	L.			50	00.00
	FRIENDS OF CHARLIE LASTER 2008		1	Туре	,					
	Office Sought: House Disbu	rsement For: 2008 Primary X General Other (specify)								
	Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS BENGE 2008					Date of	of Disbu	rsement		
	Mailing Address 3804 SOUTH ROLLIN	G OAKS DR.				0 ^M 7	M / L	02	ž Ž	0 0 8
	City Tulsa	State Zip Code OK 74133				Amou	nt of Ea	ch Disbu		this Period
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	FRIENDS OF CHRIS BENGE 2008 Office Sought: House Disbu	rsement For: 2008		Туре	-					
	Senate President State: OK District:	Primary X General Other (specify) ▼								

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	s)		NE NUMBER: PAGE 290 / 303 only one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 23 24 25 28a 28b 28c X 29
	y Information copied from such Reports and State for commercial purposes, other than using the na				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC				
<u> </u>	Full Name (Last, First, Middle Initial) FRIENDS OF KRIS STEELE 2008				Transaction ID: EXP.B.49079 Date of Disbursement 0 7 0 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Mailing Address 1211 CAMBRIDGE DF				07 02 2000
	City Shawnee	State Zip Code OK 74804			Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	500.00
	Candidate Name FRIENDS OF KRIS STEELE 2008		Ca	tegory/ Γype	
	Office Sought: House Disbu	rsement For: 2008 Primary X General Other (specify)			
	Full Name (Last, First, Middle Initial) FRIENDS OF RON PETERSON				Transaction ID: EXP.B.49076 Date of Disbursement
	Mailing Address P.O. BOX 1615				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City BROKEN ARROW	State Zip Code OK 74013			Amount of Each Disbursement this Perio
	Purpose of Disbursement		-	011	1000.00
	Candidate Name FRIENDS OF RON PETERSON		1	tegory/ Γype	
	Office Sought: Senate President State: OK Disbut State: OK District:	rsement For: 2008 Primary X General Other (specify)	•		
	Full Name (Last, First, Middle Initial) GROW OKLAHOMA PAC				Transaction ID: EXP.B.49075 Date of Disbursement
	Mailing Address 2914 WEST H STREE	Т			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Jenks	State Zip Code OK 74037			Amount of Each Disbursement this Period
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	Candidate Name GROW OKLAHOMA PAC			tegory/ Γype	
	Senate President	rsement For: Primary General Other (specify)	1		
	State: OK District:				
1	UBTOTAL of Disbursements This Page (optional				2500.00

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r fo	r commercial pur	ed from such Reports poses, other than usi MITTEE (In Full) TH SOLUTIONS I	ng the name	and addre	ss of any political	com	nmitt	person fo ee to soli	or the pu	ibuti	e of s	oliciting om suc	contri	butions	
F -	Full Name (Last, I HOEVEN COM Mailing Address	First, Middle Initial) MITTEE P.O. BOX 952							Date of		sburs	EXF ement		9067 Ž 0 Ď 8	Y
E	City BISMARK Purpose of Disbu	rsement		State ND	Zip Code 58502				Amou	int of	f Each	Disbu		nt this P	
- H	Candidate Name HOEVEN COM		Disburse	ment For:	2008	Ca	01 ateg	ory/		•					
S	State: ND	Senate President District:		Primary Other (spe	X General										
J	•	First, Middle Initial) FOR STATE SEN PO BOX 265	ATE						Date		sburs	EXF ement		9068 Ž 0 Ď 8	Υ
	Dity Fessenden			State ND	Zip Code 58438				Amou	ınt o	f Each	Disbu		nt this P	-
c	Purpose of Disbur Candidate Name IERRY KLIEN	rsement FOR STATE SEN	ATE			Ca	01 ⁻ ateg	ory/			•			500.00)
Ċ	Office Sought:	House Senate President District:		ment For: Primary Other (spe	2008 X General ecify)		. , , ,	-							
	Full Name (Last, F AMB FOR SE	First, Middle Initial) NATE 2008	1						Date of	of Di	sburs				
N	Mailing Address	801 N. LINCOL	N BLVD.						0 ^M 7	М	[′] □ C	2 /	Y	8 Ó 0 Š	Y
	City OKLAHOMA C			State OK	Zip Code 73150				Amou	int o	Each	Disbu		nt this P	-
_	Purpose of Disbur Candidate Name LAMB FOR SE					Ca	01 ateg Typ	ory/		•					•
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SCHEDULE B (FEC Form 3X)

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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 28a		23 28b		24 28c	X	25 29	26 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	e and address of any politic	al com	nmitt	ee to sol	icit cont	ributi	ions f	rom s				
V Л .	Full Name (Last, First, Middle Initial) MIKE MAZZEI FOR SENATE 2008 Mailing Address PMB 220 8988-L S. SHE	ERIDAN				Trans Date	of D	isburs				080 0 ŏ 8	Y
	City Tulsa	State Zip Code OK 74133				Amou	ınt o	f Eacl	n Dis	burse	-	this F	-
	Purpose of Disbursement Candidate Name MIKE MAZZEI FOR SENATE 2008 Office Sought: House Disburs Senate President State: OK District:	ement For: 2008 Primary X Genera Other (specify)	Ca	01 ateg	ory/	L.,	0				, 5	00.00) .
3.	Full Name (Last, First, Middle Initial) NORTH DAKOTA SENATE DEMOCRATION Mailing Address 33200 331 AVE. SW	C CAUCUS				Trans Date		isburs			v	086 0 ŏ 8	Y
	City RYDER Purpose of Disbursement Candidate Name NORTH DAKOTA SENATE DEMOCRATION Office Sought: House Disburs Senate	State Zip Code ND 58779 C CAUCUS ement For: Primary Genera	Ca	01 ateg Typ	ory/	Amou	int o	f Eacl	n Dis	burse		t this F	
	State: ND District: Full Name (Last, First, Middle Initial) NORTH DAKOTA SENATE REPUBLICAN	Other (specify) ▼				Trans Date		-	_		3.490	073	
	Mailing Address BOX 265					0 ^M 7	М	/ D	0 2	/	^Y 2	0 ŏ 8	Y
	City FESSENDEN Purpose of Disbursement	State Zip Code ND 58438				Amou	ınt o	f Eacl	n Dis	burse		this F	
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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	• • • • • • • • • • • • • • • • • • • •		
<u> </u>	Full Name (Last, First, Middle Initial) REPUBLICAN SENATE VICTORY PAC Mailing Address 7308 N. NORMAN RD.			Transaction ID: EXP.B.49074 Date of Disbursement O 7 M / D 0 D / Y Y Y O N 8
	City Oaklahoma City	State Zip Code OK 73132		Amount of Each Disbursement this Period
	Purpose of Disbursement	70102	011	1000.00
	Candidate Name REPUBLICAN SENATE VICTORY PAC		Category/ Type	
	Office Sought: House Senate President State: OK District:	ment For: Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) SENATOR NETHING'S RELECTION CAN	PAIGN		Transaction ID: EXP.B.49084 Date of Disbursement
	Mailing Address P.O. BOX 1059			07 02 2008
	City JAMESTOWN	State Zip Code ND 58402		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name		011 Category/	400.00
	SENATOR NETHING'S RELECTION CAM		Type	
	Office Sought: House Disburse Senate President State: ND District:	ment For: 2008 Primary X General Other (specify)		
	Full Name (Last, First, Middle Initial) TODD PORTER FOR HOUSE OF REPRE	SENATIVES		Transaction ID: EXP.B.49070 Date of Disbursement
	Mailing Address 4604 BORDER HARBOR	R DR.		07 02 2008
	City Mandan	State Zip Code ND 58554		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	200.00
	Candidate Name TODD PORTER FOR HOUSE OF REPRE	SENATIVES	Category/ Type	
	Office Sought: House Senate President State: ND District:	ment For: 2008 Primary X General Other (specify)		
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	Full Name (Last, First, Middle Initial) ANTHONY DELUCA FOR LEGISLATURE					Trans Date	of Di	sburs			51009 Ž 0 ŏ	0 Y
	Mailing Address 1438 HOMESTEAD ROA											
		State Zip Code PA 15147				Amou	ınt of	Each	Disb	-	ent this	
	Purpose of Disbursement Candidate Name ANTHONY DELUCA FOR LEGISLATURE	COMMITTEE	Ca	01 ateg Typ	ory/				-	•	1000.0	00
		ment For: 2008 Primary X General Other (specify)	<u> </u>	ТУР	-							
	Full Name (Last, First, Middle Initial) CITIZENS FOR TIFFANY					Date		sburs	ement		51021 Ž 0 Ŏ	o Y
	Mailing Address PO BOX 1418					0 7		3	Ő		200	8
	•	State Zip Code WI 54501	_			Amou	int of	Each	Disb		ent this	
	Candidate Name CITIZENS FOR TIFFANY		Ca	01 ateg Typ	ory/		•					
	Office Sought: House Senate President State: WI District:	ment For: 2008 Primary X General Other (specify)	1									
	Full Name (Last, First, Middle Initial) CITIZENS FOR VINCENT HUGHES					Date	of Di	sburs	ement		51001	
	Mailing Address 4601 MARKET STREET,	1ST FLOOR				0 ^M 7	М	□ 3	0	Y	ž 0 ŏ	8 ^Y
		State Zip Code PA 19139				Amou	ınt of	Each	Disb	ursem	ent this	Period
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	Senate President	ment For: 2008 Primary X General Other (specify)	1	712								
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for each category of the Detailed Summary Page for each category of the Detailed Summary Page 21b 22 23 24 25 25	SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE	-	PAGE 295/303
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) MEDOO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medoo Health PAC) Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHRIS ROSS Mailing Address 2 CONCORD WAY Clay Chadds Ford PA 19317 Purpose of Disbursement Condidate Name COMMITTEE TO ELECT CHRIS ROSS Office Sought: House President State: PA District: Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT KEITH MCCALL Mailing Address PO BOX 244 City State: Zip Code PA 18232 Transaction ID: EXP,B.51014 Date of Disbursement Other (specify) ▼ Transaction ID: EXP,B.51014 Date of Disbursement Transaction ID: EXP,B.51014 Date of Disbursement Transaction ID: EXP,B.51014 Date of Disbursement Other (specify) ▼ Transaction ID: EXP,B.51014 Date of Disbursement Transaction ID: EXP,B.51015 Transaction ID: EXP,B.51005 Date of Disbursement Transaction ID: EXP,B.51005 Date of Disbursement this Period Transaction ID: EXP,B.5	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 23	
NAME OF COMMITTEE (in Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medoo Health PAC) Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHRIS ROSS Mailing Address 2 CONCORD WAY City State Zip Code Chadds Ford PA 19317 Purpose of Disbursement Committee To ELECT CHRIS ROSS Office Sought: House Sanate Primary X General Primary X General President Committee To RE-ELECT KEITH MCCALL Office Sought: House PA 18232 Purpose of Disbursement Committee To RE-ELECT KEITH MCCALL Office Sought: House Pa 18232 Purpose of Disbursement Committee To RE-ELECT KEITH MCCALL Office Sought: House Pa 18232 Purpose of Disbursement Committee To RE-ELECT KEITH MCCALL Office Sought: House Sanate Primary X General Primar					
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	Office Sought: House Disburs Senate President State: PA District:	Primary Other (spe	X General		
	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN PIPPY				Transaction ID: EXP.B.51003 Date of Disbursement
	Mailing Address PO BOX 1183				$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}7^M\end{bmatrix}^{M} \begin{bmatrix}\begin{smallmatrix}D\\O\end{smallmatrix}3^D\end{bmatrix}^{D} \begin{bmatrix}\begin{smallmatrix}Y\\O\end{smallmatrix}3^V\\O\end{bmatrix}^{Y} \begin{bmatrix}\begin{smallmatrix}Y\\O\end{smallmatrix}0^V\\O\end{bmatrix}^{Y} \begin{bmatrix}Y\\O\end{smallmatrix}0^V\\O\end{bmatrix}^{Y}$
	City Moon Township	State PA	Zip Code 15108		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	500.00
	Candidate Name FRIENDS OF JOHN PIPPY			Category/ Type	
	Senate President	ement For: Primary Other (spe	2008 X General ecify)		
	State: PA District: Full Name (Last, First, Middle Initial) FRIENDS OF MIKE GERBER				Transaction ID: EXP.B.51012 Date of Disbursement
					M M / D D / Y Y Y
	Mailing Address PO BOX 208				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 0 & 3 & 0 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & 2 & 0 & 4 \\ 2 & 0 & 0 & 8 \end{bmatrix} & \begin{bmatrix} Y & Y & 2 & 0 & 4 \end{bmatrix}$
	Mailing Address PO BOX 208 City Ambler	State PA	Zip Code 19002		Amount of Each Disbursement this Period
	City Ambler Purpose of Disbursement			011	
	City Ambler Purpose of Disbursement Candidate Name FRIENDS OF MIKE GERBER	PA		011 Category/ Type	Amount of Each Disbursement this Period
	City Ambler Purpose of Disbursement Candidate Name FRIENDS OF MIKE GERBER		19002 2008 X General	Category/	Amount of Each Disbursement this Perioc

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	FOR LINE (check onl	NUMBER: PAGE 299 / 303
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	, , .		
<u>/</u>	Full Name (Last, First, Middle Initial) FRIENDS OF TED ERICKSON Mailing Address 101 W. BALTIMORE AV			Transaction ID: EXP.B.51000 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		· 		
	City Media	State Zip Code PA 19063		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name FRIENDS OF TED ERICKSON		Category/ Type	
		ement For: 2010 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) FRIENDS OF TODD EACHUS			Transaction ID: EXP.B.51010 Date of Disbursement
	Mailing Address P.O. BOX 2174			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} 7^{M} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} 3 \begin{bmatrix} D \\ O \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} 2 \begin{bmatrix} O \\ O \end{smallmatrix} 3 \begin{bmatrix} O \\ O \end{bmatrix} $
	City HAZLETON	State Zip Code PA 18201		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name FRIENDS OF TODD EACHUS		Category/ Type	
	Office Sought: House Senate President State: PA District:	ement For: 2008 Primary X General Other (specify) ▼		
	Full Name (Last, First, Middle Initial) FRIENDS OF VINCE BIANCUCCI			Transaction ID: EXP.B.51007 Date of Disbursement
	Mailing Address 226 PLEASANT DRIVE			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City ALIQUIPPA	State Zip Code PA 15001		Amount of Each Disbursement this Perio
	Purpose of Disbursement		011	500.00
	Candidate Name FRIENDS OF VINCE BIANCUCCI		Category/ Type	
		ement For: 2008 Primary X General Other (specify)	70-2	
	Since in Since			2500.00

	B (FEC FOIIII 3X	' Use sep	arate schedule(s)		FOR LINE (check only		••			303
ITEMIZED DI	SBURSEMENTS	for each Detailed	category of the Summary Page		21b 27	22 28a	23 28b	24 28c	25 X 29	$\begin{bmatrix} 2 \\ 3 \end{bmatrix}$
or for commercial pu	ed from such Reports and rposes, other than using the MITTEE (In Full) LTH SOLUTIONS INC	he name and addre	ess of any political	comn	nittee to sol	icit contri	butions fr	om such	ontributions committee	i
,	First, Middle Initial) JBLICAN CAMPAIGN P.O. BOX 11787	COMMITTEE					f Disburs		B.51019 ° 2008	3 Y
City HARRISBURG		State PA	Zip Code 17108			Amou	nt of Each	Disburse	ement this F	-
Office Sought:	JBLICAN CAMPAIGN House Senate President	COMMITTEE Disbursement For: Primary Other (spr	General ecify) ▼	Cat	011 egory/ ype		• •		1000.00	
•	District: First, Middle Initial) PERINO FOR STATE I P.O. BOX 26048	REPRESENTAT	TIVE COMMITT	EE		Date o	f Disburs		B.51013 Y 2 0 0 8	3 Y
City PHILADELPH		State PA	Zip Code 19128			Amou	nt of Each	Disburs	ement this F	Period
Candidate Name KATHY MAND Office Sought:	PERINO FOR STATE I	REPRESENTAT Disbursement For: Primary Other (sp.	2008 X General		egory/ ype				500.00	ء ۔
State: PA	District:		, ,							
, ,	First, Middle Initial) EADER'S PAC					Date o	f Disburs	ement	B.51020	
, ,	. ,						f Disburs	ement	B.51020 Y 2 0 0 8	Y
Mailing Address City HARRISBURG	P.O. BOX 506	State PA	Zip Code 17108			Date o	of Disburs	ement	Y 2008	Period
Mailing Address City HARRISBURG Purpose of Disbu	P.O. BOX 506 P.O. BOX 506 Dursement EADER'S PAC		17108 General	Cat	011 egory/ ype	Date o	of Disburs	ement	Ý 2 0 0 8	Period

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c X 29 3
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a. M	Medco Health PAC)
	Full Name (Last, First, Middle Initial) SCOTT BOYD VICTORY COMMITTEE Mailing Address PO BOX 265			Transaction ID: EXP.B.51008 Date of Disbursement
		State Zip Code		Amount of Each Disbursement this Period
	Lampeter	PA 17537		500.00
	Purpose of Disbursement Candidate Name		011 Category/	300.00
	SCOTT BOYD VICTORY COMMITTEE Office Sought: House Disburse Senate President	ment For: 2008 Primary X General Other (specify)	Туре	
	State: PA District: Full Name (Last, First, Middle Initial) SENATE REPUBLICAN CAMPAIGN COM	MITTEE		Transaction ID: EXP.B.51018 Date of Disbursement
	Mailing Address P.O. BOX 792			0 7 M / D 3 D / Y Y Y O Y 8 Y
	City HARRISBURG	State Zip Code PA 17108		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name		011 Category/	1000.00
	SENATE REPUBLICAN CAMPAIGN COM Office Sought: House Senate President State: PA District:	ment For: Primary General Other (specify)	Туре	
	Full Name (Last, First, Middle Initial) CITIZENS FOR WHITE			Transaction ID: EXP.B.51027 Date of Disbursement
	Mailing Address 4744 BOKAY DRIVE			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 3 & 1 \\ 3 & 1 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & 2 & 0 & 0 & 8 \\ 2 & 0 & 0 & 8 \end{bmatrix}$
	City KETTERING	State Zip Code OH 45440		Amount of Each Disbursement this Period
	Purpose of Disbursement VOIDED CHECK		011	-500.00
	Candidate Name CITIZENS FOR WHITE		Category/ Type	
	Office Sought: Senate President State: OH Disburse	ment For: Primary General Other (specify) ▼		
Г				1000.00

В.

District:

ago# 2000 to 120 to		
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		PAGE 302 / 303 seck only one) 21b 22 23 24 25 26
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	FICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) CITIZENS FOR WHITE Mailing Address 4744 BOKAY DRIVE		Transaction ID: EXP.B.51028 Date of Disbursement M 7 M / D 3 D / Y Y Y O Y 8 Y 2 0 0 8 Y
KÉTTERING Purpose of Disbursement	State Zip Code OH 45440	Amount of Each Disbursement this Period -500.00
VOIDED CHECK Candidate Name CITIZENS FOR WHITE	O1 Categ	ory/
Office Sought: House Senate President State: OH District:	ment For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) GREENSTEIN FOR ASSEMBLY Mailing Address P.O. BOX 492		Transaction ID: EXP.B.51029 Date of Disbursement 0 7
City	State Zip Code NJ 08536	Amount of Each Disbursement this Period
Purpose of Disbursement VOIDED CHECK Candidate Name GREENSTEIN FOR ASSEMBLY	01 Categ Typ	ory/
Office Sought: House Disburset Senate President		

SUBTOTAL of Disbursements This Page (optional)	•	-1000.00
TOTAL This Period (last page this line number only)	•	29400.00

State: NJ

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE 303 / 303

FOR LINE NUMBER: (check only one)

9 X 10

Excluding Loans

NAME	ΟF	COMM	/ITTEE	(In	Full)
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MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)		
A. Full Name (Last, First, Middle Initial) of Debt NIELSEN, MERKSAMER, PARRINELLO	Nature of Debt (Purpose): LEGAL & ACCOUNTING FEES			
Mailing Address 1415 L STREET, STE. 12				
City State SACRAMENTO CA	ZIP Code 95814			
Outstanding Balance Beginning This Period		Transaction ID: PAY:D:47567		
1913.23				
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period		
0.00	1913.23	0.00		
B. Full Name (Last, First, Middle Initial) of Debt NIELSEN, MERKSAMER, PARRINELLO	Nature of Debt (Purpose): LEGAL & ACCOUNTING FEES			
Mailing Address 1415 L STREET, STE. 12				
City State SACRAMENTO CA	ZIP Code 95814			
Outstanding Balance Beginning This Period		Transaction ID: PAY:D:51982		
0.00				
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period		
2556.13	0.00	2556.13		
1) SUBTOTALS This Period This Page (optional)		► 2556.13 ► 2556.13		
2) TOTALS This Period (last page this line number	:i Ottiy)	_		
3) TOTAL OUTSTANDING LOANS from Sche	dule C (last page only)	0.00		
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page only)	2556.13		